

120 S Pleasant St Belding, MI

POVERTY EXEMPTION GENERAL GUIDELINES 2025

The following criteria must be met to be eligible for the Poverty Exemption:

- 1. The applicant must own and occupy the property and have a valid Principal Residence Exemption filed with the Assessor's Office.
- 2. File a Poverty Exemption Application (available at City Offices) with the assessor's Office each year after January 1st but before the day prior to the last day of the December Board of Review.
- 3. Provide federal and state income tax returns for all persons residing in the principal residence including any property tax credit forms. These income tax returns shall include those filed in the current year or the immediately preceding year. IMPORTANT: Treasury form 4988 (Poverty Exemption Affidavit) shall be filed with the Poverty Application for all persons residing in the residence who were not required to file federal or state income tax returns in the current year or in the immediately preceding year.
- 4. Produce a valid driver's license or other valid form of identification.
- 5. Produce a deed, land contract, or other evidence of ownership of the property for which the exemption is requested.
- 6. Must meet the federal poverty income standards as defined and determined annually by the United States Department of Health and Human Services. The amount of relief due to poverty that will be granted by the Board of Review for any qualified applicant will be determined as follows:
 - a. Household income levels greater than 10% of the Federal Poverty Income Standards will not be granted an exemption
 - b. Household income levels greater than the Federal Poverty Income Standards up to 5% greater than Federal Poverty Income Standards will be eligible for a 50% reduction.
 - c. Household income levels 5% greater than the Federal Poverty Income Standards up to 10% greater than Federal Poverty Income Standards will be eligible for a 25% reduction.
 - d. Household income levels equal to or less than the Federal Poverty Income Standards will be eligible for a 100% reduction. (SEE CHART ON NEXT PAGE)
- 7. Must meet the Asset Level Test. Household assets refer to the amount of cash, fixed assets or other property that could be used, or converted to cash for use in payment of property taxes (your residence and primary vehicle are not included in the Asset test) it does include but is not limited to:
 - a. A second home, additional land not associated with the primary residence.
 - b. Vehicles other than your primary vehicle, motor homes, campers, ATV's, boats and motorcycles.
 - c. Jewelry, antiques, artwork, equipment, and other personal property of value.
 - d. Gifts, loans lump sum inheritances and one-time insurance payments.
 - e. Food or housing received in lieu of wage
 - f. Bank accounts, stocks, bonds, and investments. This also includes the money received from the sale of stocks, bonds, investments, cars, and houses unless the person is in the specific business of selling

- g. Please list all assets on the included sheet (Write NA on this sheet if you have no assets to list).
- h. Applicant must meet the requirements of the asset test as follows:

i.	1 person	\$31,816
ii.	2 persons	\$39,316
iii.	3 persons	\$46,929
iv.	4 persons	\$54,429
٧.	5 persons	\$59,996
vi.	6 persons	\$69,542
vii.	7 persons	\$77,155
viii.	8 persons	\$84,768
ix.	9 persons	\$91,813

2025 INCOME GUIDELINES

SIZE OF FAMILY UNIT	INCOME GUIDELINES 100% Exemption	INCOME GUIDELINES 50% Exemption	INCOME GUIDELINES 25% Exemption
	\$15,060	\$15,061 thru	\$15,814 thru
1		\$15,813	\$16,566
	\$20,440	\$20,441 thru	\$21,463 thru
2	9	\$21,462	\$22,484
	\$25,820	\$25,821 thru	\$27,112 thru
3		\$27,111	\$28,407
	\$31,200	\$31,201 thru	\$32,761 thru
4		\$32,760	\$34,320
	\$36,580	\$36,581 thru	\$38,410 thru
5		\$39,409	\$40,238
	\$41,960	\$41,961 thru	\$44,059 thru
6		\$44,058	\$46,156
	\$47,340	\$47,341 thru	\$49,708 thru
7		\$49,707	\$52,074
	\$52,720	\$52,721thru	\$55,357 thru
8	12	\$55,356	\$57,992
Each Additional			
Person	\$5,380	\$5,573	\$5,839

Application for MCL 211.7u Poverty Exemption

This form is issued under the authority of the General Property Tax Act, Public Act 206 of 1893, MCL 211.7u.

MCL 211.7u of the General Property Tax Act, Public Act 206 of 1893, provides a property tax exemption for the principal residence of persons who, by reason of poverty, are unable to contribute toward the public charges. This application is to be used to apply for the exemption and must be filed with the Board of Review where the property is located. This application may be submitted to the city or township the property is located in each year on or after January 1.

To be considered complete, this application must: 1) be completed in its entirety, 2) include information regarding all members residing within the household, and 3) include all required documentation as listed within the application. Please write legibly and attach additional pages as necessary.

PAR'	1: PERSONAL INFOR	MATION -	- Petitioner must li	st all required persons	al Informa	tion.		
Pelilloner's Name				ot an rodinou porooni	Daylime Phone Number			
Age of	Pelilloner	Marital Status		Age of Spouse Number of Legal C				Dependents
Property Address of Principal Residence			City			State	ZIP Code	
Check if applied for Homestead Property Tax Credit			Amount of Homestead Property Tex Credit					
PAR'	Γ2: REAL ESTATE INF	ORMATIO	N					
	the real estate information				o provide	a de	eed, lan	d contract or other
Proper	y Parcel Code Number			Name of Mortgage Company				
Unpald	Balance Owed on Principal Resid	lence	Monthly Payment	Length of Time at this Residence				
Proper	ly Description							
	25	•						
PAR	T 3: ADDITIONAL PRO	PERTY IN	FORMATION					
List	information related to an	y other pro	perly owned by yo	u or any member resid				
Check if you own, or are buying, other property. If che information below.			ecked, complete the Amount of Income Earned from other Prope			om other Property		
	Property Address			City			State	ZIP Code
1					1			
	Name of Owner(s)			Assessed Value	Date of Las	il Taxes	s Pald	Amount of Taxes Paid
	Property Address			City			State	ZIP Code
2	Name of Owner(s)			Assessed Value	Date of Las	l Taxos	s Pald	Amount of Taxes Paid

PART 4: EMPLOYMENT I	NFORMATIO	N — List your curr	rent emplo	yment in	nform	ation.		
Name of Employer								
Address of Employer				City State ZIF				ZIP Code
Contact Person			Employer T	elephone Nu	umber			
PART 5: INCOME SOURCE	ES							
List all income sources, income, for all persons res	compensatio	n, disability, gover support, friend or	nment pen	sions, w	orker	's compensat	ion, divi	dends, claims and
u.	Source o	of Income				Monthl	y or An (indicate	nual Income which)
				-		1		
	*							
PART 6: CHECKING, SA	/INGS AND I	NVESTMENT INF	ORMATIC	N				
List any and all savings accounts, postal savings, persons residing at the pro	credit union s	household memb shares, certificates	pers, inclu s of depos	ding but it, cash,	not I stock	limited to: ch s, bonds, or	ecking a similar in	accounts, savings nvestments, for all
Name of Financial Inst or Investments	Amount on Deposit	Current nterest Ra	Current erest Rate Name on Accou			nt	Value of Investment	
				,		-		
· ·								
PART 7: LIFE INSURANCE	E — List all p	oolicies held by all	househol	d membe	ers.			,
Name of Insured	Amount o	AND ADDRESS AND ADDRESS	Policy	Paid in	id in Relations			Relationship to Insured
	9							
	_							
PART 8: MOTOR VEHICL								
All motor vehicles (includ within the household mus		les, motor homes	, camper	trailers, d	etc.) I	held or owne	d by an	y person residing
Make	Year	Monthly		thly I	Payment Payment	B	alance Owed	

PART 9: HOUSEHOLD OC	CUPANTS -	- List all	persons liv	/ing ir	n the househo	old.			
First and Last Name			Age	Relationship to Applicant Pla		Place of	Employment	\$ Contribution to Family Income	
	*								
		_							
PART 10: PERSONAL DEI	DT l jet all	nersons	al debt for s	ll hou	reshold memb	nere			
PART TO: PERSONAL DE	31 - List an	persone			Jabriola Hiorin	7610.			
Creditor	Purpose o	of Debt	Dat of De		Original Bal	ance Mon	thly Payment	Balance Owed	
9						¥			
								41	
		7.							
						12			
PART 11: MONTHLY EXPI	ENSE INFOR	MATIO	N						
The amount of monthly ex necessary.				resid	lence for each	n category	must be liste	d. Indicate N/A as	
Healing	Electric			Water			Phono		
Cable	Food			Clothing			Health Insurance		
Garbage Dayo		Daycare				Car Exp	Car Expense (gas, repair, etc.)		
Other (type and amount)		Olher (typ	r (type and amount)			Other (ty	Other (type and amount)		
Other (type and amount) Other		Olhor (typ	ype and amount)			Other (ty	Olher (type and amount)		

NOTICE: Per MCL 211.7u(2)(b), federal and state income tax returns for all persons residing in the principal residence, including any properly tax credit returns, filed in the immediately preceding year or in the current year must be submitted with this application. Federal and state income tax returns are not required for a person residing in the principal residence if that person was not required to file a federal or state income tax return in the tax year in which the exemption under this section is claimed or in the immediately preceding tax year.

PART 11: POLICY AND GUIDELINES ACKNOWLEDGMENT						
The governing body of the local assessing unit shall determine and make available to the public the policy and guidelines used for the granting of exemptions under MCL 211.7u. In order to be eligible for the exemption, the applicant must meet the federal poverty guidelines published in the prior calendar year in the Federal Register by the United States Department of Health and Human Services under its authority to revise the poverty line under 42 USC 9902, or alternative guidelines adopted by the governing body of the local assessing unit so long as the alternative guidelines do not provide income eligibility requirements less than the federal guidelines. The policy and guidelines must include, but are not limited to, the specific income and asset levels of the claimant and total household income and assets. The combined assets of all persons must not exceed the limits set forth in the guidelines adopted by the local assessing unit.						
The applicant has reviewed the applicable policy and guidelines adopted by the city or township, including the specific income and asset levels of the claimant and total household income and assets.						
PART 12: CERTIFICATION						
I hereby certify to the best of my knowledge that the information provided in this form is complete, accurate and I am eligible for the exemption from properly taxes pursuant to Michigan Compiled Law, Section 211.7u.						
Printed Name	Signature	Date				

This application shall be filed after January 1, but before the day prior to the last day of the local unit's December Board of Review.

Decision of the March Board of Review may be appealed by petition to the Michigan Tax Tribunal by July 31 of the current year. A July or December Board of Review decision may be appealed to the Michigan Tax Tribunal by petition within 35 days of decision. A copy of the Board of Review decision must be included with the petition.

Michigan Tax Tribunal PO Box 30232 Lansing MI 48909

Phone: 517-335-9760

E-mail: taxtrib@michigan.gov

City of Belding

2025

Poverty Exemption Asset Level Information

See #7 Must meet the Asset Level Test.

Item (type of asset	:)	Value
) i	
-		-
	1	
	· ·	
	`	
	, }	
	,	
	1	
.,		
	TOTAL	

Affirmation of Ownership and Occupancy to Remain Exempt by Reason of Poverty

This form is issued under the authority of Public Act 253 of 2020.

This form is to be used to affirm ownership, occupancy, and income status. MCL 211.7u(2) provides that, to be eligible for exemption under this section, a person shall, subject to subsection (6) and (8), annually affirm that the applicant owns and occupies, as a principal residence, the property for which an exemption is requested.

PART 1: OWNER INFORMATION — Enter information for the person owning and occupying the residence.						
Owner Namo		Owner Telephone	Number			
Mailing Address	City		State	ZIP Code		
PART 2: LEGAL DESIGNEE INFORMATION (Complete	If applicable.)					
Legel Designee Name		Daylime Telephon	e Number			
Mailing Address	City		State	ZIP Codo		
PART 3: HOMESTEAD PROPERTY INFORMATION —	Enler Information for prop	erty in which the	exempl	lon is being claimed.		
City or Township (check the appropriate box and enter name) City Township Village		County				
Name of Local School District						
Parcel Identification Number	Year(s) Exemplion Proviously	Granted by Board	of Raviaw			
Homestead Property Address	City		State	ZIP Code		
PART 4: AFFIRMATION OF OWNERSHIP, OCCUPANO	Y, AND INCOME STAT	US (Check all	boxes t	hat apply.)		
 ☐ I own the property in which the exemption is being claimed. ☐ The property in which the exemption is being claimed is used as my homestead. Homestead is generally defined as any dwelling with its land and buildings where a family makes its home. ☐ After establishing initial eligibility for the exemption, my income and asset status has remained unchanged and/or I receive a fixed income solely from public assistance that is not subject to significant annual increases beyond the rate of inflation, such as federal Supplemental Security Income or Social Security disability or retirement benefits. 						
PART 5: CERTIFICATION						
I hereby certify to the best of my knowledge that the information provided on this form is true and I am eligible to receive an exemption from properly taxes by reason of poverly pursuant to Michigan Compiled Law, Section 211.7u.						
Owner or Legal Designee Name (print) Signature	of Owner or Legal Designee		D	ale		
Designee must attach a letter of authority.						
LOCAL GOVERNMENT USE ONLY (DO NOT WRITE BELOW THIS LINE)						
Approved Denied (Attach appeal instructions and		Tax Year(s) exe	mption wi	ll be posted to tax roll		
CERTIFICATION — I certify that, to the best of my know accurate.	wledge, the information			n is complete and		
Assessor Signature		Date Certified by	Assessor			

Poverty Exemption Affidavit

This form is issued under authority of Public Act 206 of 1893; MCL 211.7u.

INSTRUCTIONS: When completed, this document must accompany a taxpayer's Application for Poverty Exemption filed with the supervisor or the board of review of the local unit where the property is located. MCL 211.7u provides for a whole or partial property tax exemption on the principal residence of an owner of the property by reason of poverty and the inability to contribute toward the public charges. MCL 211.7u(2)(b) requires proof of eligibility for the exemption be provided to the board of review by supplying copies of federal and state income tax returns for all persons residing in the principal residence, including property tax credit returns, or by filing an affidavit for all persons residing in the residence who were not required to file federal or state income tax returns for the current or preceding tax year.

eside in the principal residence that is the subject of this Application for Poverty Exemption and that or the current tax year and the preceding tax year, I was not required to file a federal or state income ax return.	
Address of Principal Residence:	-
·	-
Signature of Person Making Affidavit Date	