2025 CITY OF SOUTHFIELD	PARCEL #: NAME(S): PHONE: HOUSEHOLD SIZE: GROSS ANNUAL INCOME:	2023:
POVERTY EXEMPTION GUIDELINES & APPLICATION	COMMENTS:	
$\underbrace{southfield}_{the \ center \ of \ it \ all^{M}}$	Cit 26000 F Southf	ssing Department ty of Southfield 0 Evergreen Road 2.0. Box 2055 field, MI 48037-2055 a: 248-796-5230 Received:



26000 Evergreen Rd. • P.O. Box 2055 • Southfield, MI 48037-2055 • www.cityofsouthfield.com

Dear Applicant:

The Michigan Compiled Laws section 211.7u, of Act 206 of 1893 the *General Property Tax Act*, gives the Board of Review authority to review requests for tax relief on the principal residence of persons in poverty. The Board of Review meets annually in March, July and December and is the only body with authority to grant *Poverty Exemptions*. The *Poverty Exemption* application can be submitted any time after January 1st and after filed will be reviewed at the next available Board of Review hearing. The final deadline to file an application is the day prior to the hearing of the December Board of Review during the year which exemption is requested. A request for Poverty may only be submitted **once** annually to the next Board of Review meeting after submittal.

The application forms are the form 5737, *Application for MCL 211.7u Poverty Exemption*, and form 5739, *Affirmation of Ownership and Occupancy to Remain Exempt by Reason of Poverty*. If your circumstances remain unchanged from the previous year's *Poverty Exemption* and you have already supplied the appropriate returns for the year prior to the current year, you do not have to resubmit them. In this situation only, you may submit only the most current year's return and a form 5739.

The application forms, eligibility guidelines and a checklist of required documentation are attached. Please complete, sign, and submit the attached application and all requested documentation to the Assessing Department at least one day prior to the nearest Board of Review date. The required documentation must be submitted with the application for *all persons residing in the homestead*.

An Assessing Department staff member will contact you regarding any additional information requested by the Board. Please note that failure to supply the appropriate documentation, or supplying information deemed to be deceptive, will result in denial of your exemption request. A notice of the Board of Review's action regarding your application will be mailed timely following the adjournment of their annual session. If your exemption request is denied you may appeal the decision to the Michigan Tax Tribunal within 35 days of the notice date. The Tax Tribunal's phone number is (517) 335-9760 and the website is <u>www.michigan.gov/taxtrib</u>.

If you have any questions or need help filling out the application, do not hesitate to contact the Assessor's Office at 248-796-5230.

Sincerely

Justin E. Prybylski, MMAO(4), MCPPE City Assessor

GUIDELINES FOR 2025 POVERTY EXEMPTION

MCL Section 211.7u and P.A. 253 of 2020 define *Poverty Exemption* and provide that in addition to forms 5737 and 5739 a taxpayer must satisfy all the following requirements on an annual basis:

- 1. The applicant must own and occupy the property as their principal residence. Principal residence is defined in MCL 211.7dd(c) as, "the one place where a person has his or her true, fixed, and permanent home, to which, whenever absent he or she intends to return."
- 2. Provide the federal and state income tax returns for the current and immediately preceding year, including any property tax credit forms (MI1040-CR) for all persons **residing in the principal residence**. Any person(s) residing in the principal residence that were not required to file a federal or state income tax return, for the current or immediately preceding year, must instead submit a form 4988, *Poverty Exemption Affidavit*, swearing and affirming this to be true.
- 3. Produce a valid driver's license or other form of identification.
- 4. Produce a deed, land contract, or other evidence of ownership for the property.
- 5. 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 <u>or</u> alternative guidelines adopted by the local assessing unit. The City of Southfield has adopted income guidelines increased by 20% over the federal poverty guidelines with the ability to add medical expenses. This allows the Board to better assist those on the threshold to receive much needed assistance. The following chart outlines the federal and City income guidelines used for granting poverty exemptions on 2025 assessments, as approved by the State Tax Commission and Council:

Size of Family Unit	Income Guidelines	Southfield Adds 20%	Southfield Adds
1	\$ 15,060	\$ 18,072	all
2	\$ 20,440	\$ 24,528	household
3	\$ 25,820	\$ 30,984	medical*
4	\$ 31,200	\$ 37,440	expenses.
5	\$ 36,580	\$ 43,896	
6	\$ 41,960	\$ 50,352	Add
7	\$ 47,340	\$ 56,808	them
8	\$ 52,720	\$ 63,264	here.
For each additional person, add	\$ 5,380	\$ 6,456	*Must be verified with receipts paid by applicant

6. Meet the asset level test adopted by the City of Southfield.

POLICY FOR POVERTY EXEMPTION PERCENTAGE

Public Act 253 of 2020 amended *Poverty Exemption* requirements under MCL 211.7u. There are now specific percentage reductions to taxable value that must be used by the Board of Review when granting *Poverty Exemptions*, unless the Local Government Unit has been approved by the State Tax Commission to deviate from these. MCL 211.7u(5) states that if a person claiming a *Poverty Exemption does* meet all eligibility requirements, the Board of Review shall grant the exemption, in whole or in part, with a 25%, 50% or 100% reduction in taxable value.

The City of Southfield has adopted a *Poverty Exemption* policy that grants a full exemption, reducing the taxable value by 100% when the applicant and all persons living in the principal residence have an income that is at or below the guideline for Southfield's income requirements and their household assets do not exceed \$35,000. *Please note that if you are granted 100% exemption from property taxes due to poverty your ability to qualify for and receive the Michigan Homestead Property Tax Credit may be affected and/or eliminated. You may no longer receive a refund for this credit annually.*

If an exemption application is approved by the Board of Review, the assessed and taxable values will be adjusted accordingly, relieving the tax burden from your property completely. The homeowner will still be responsible for all special assessments levied on the property. There is no requirement that the property taxes must be paid in full as of the application date. An exemption is typically granted for the current tax year only, but PA 191 of 2023 allows the July or December Board to retroactively approve exemption for the previous tax year, if the applicant qualified.

Criteria for Determining Exemption Percentage

The asset level test adopted by the City of Southfield will be applied to each application to determine the level of exemption necessary for the applicant. The documents submitted will be used as the basis for the asset level test and assist the Board of Review in determining the applicant's qualification for exemption. This asset test will be based on the amount of household income generated from all sources and adjusted for expenses. The amount and type of total assets will also have weight in the analysis of the asset level test. *Please note: all applicants for poverty exemption may be investigated by the City to verify the validity of statements and information submitted in the application.*

Income: the amount of total household income must not exceed the City of Southfield's adopted income guidelines based on household size. The City of Southfield has added a 20% increase and excess medical expenses to the Federal Poverty Income Standards. The City of Southfield adheres to the United States Census Bureau's definition of "income" which includes, but is not limited to:

- Money, wages, salaries before deductions, regular contributions from persons not living in the residence.
- Net receipts from non-farm or farm self-employment (receipts from a person's own business, professional enterprise, or partnership, after business expense deductions).

- Regular payments from social security, railroad retirement, unemployment, worker's compensation, veteran's payments, public assistance, supplemental security income (SSI).
- Alimony, child support, military family allotments.
- Private and governmental retirement and disability pensions, regular insurance, annuity payments.
- College or university scholarships, grants, fellowships, assistantships.
- Dividends, interest, and net income from rentals, royalties, estates, trusts, gambling or lottery winnings.

<u>Assets</u>: In addition to meeting the income level requirements as noted above, Applicants must also meet requirements based on asset level, or otherwise stated requirements, such as savings accounts, checking accounts, certificates of deposit, investments (including collectable items purchased for their investment value), stocks, bonds, inheritances, life insurance policies, interest earnings/dividends, retirement funds, and ownership in other real estate property.

To be eligible for an exemption based on the asset level, or other standards, the following requirement must be met:

- Applicant shall report the total value of savings accounts, checking accounts, and certificates of deposit, all investments, stocks, bonds, inheritances, life insurance policies, interest earning/dividends, and retirement funds from all household members.
- Applicants shall not own interest in any real estate or leasing other than their principal residence.
- The total value of any recreational vehicles or equipment shall not exceed the amount of the current annual property tax obligation. Recreational vehicles include snowmobiles, boats, jet skis, camping trailers, travel trailers, motorcycles and motor homes, off-road vehicles, or anything else which may be considered a recreational vehicle.

The total value of the household assets, excluding the home and primary vehicles for all persons living in the principal residence **must not exceed \$35,000**. The applicant must submit copies of these documents for each account held by the applicant and all persons residing in the principal residence.

If an applicant does not qualify based on the asset level test, they will be denied *Poverty Exemption*. A denial of poverty exemption claim must be done to the Michigan Tax Tribunal, within 35 days from the date of the denial notice.

The Board of Review is authorized to approve an extension for those individuals that are disabled or on fixed income for up to three (3) years. An applicant that qualifies for a three (3) year extension, must annually file a form 5739, *Affirmation of Ownership and Occupancy to Remain Exempt by Reason of Poverty*, attesting to the fact that no changes have occurred in their financial situation during the past year. For all other applicants, the filing of an application annually shall continue.

May Dr. Kensor			uncil President "Ari" Mandelbaum	City Clerk Janet Jackson		reasurer owenberg
			City Cour	ıcil		
Nancy L.M. Banks	Daniel Bi	rightwell	Dr. Lloyd Crews	Yolanda Haynes	Charles Hicks	Coretta Houge

APPLICANT'S CHECKLIST

The asset level test adopted by the City of Southfield will require certain documents to be submitted that assist the Assessor and Board of Review in determining your qualification for exemption. The applicant must supply the following documentation for all persons residing in the principal residence:

- □ Federal Income Tax Returns (current & prior year) -or- Form 4988
- □ Michigan Tax Returns & MI1040-CR (current & prior year) -or- Form 4988
- □ Social Security Benefit Statement (Form SSA 1099)
- □ Form 5737, Application for MCL 211.7u Poverty Exemption
- □ Form 5739, Affirmation of Ownership and Occupancy to Remain Exempt....
- Driver's License
- Deed, land contract, or other evidence of property ownership, if applicable
- □ Mortgage Statement showing balance
- □ Medical Receipts, if applicable
- □ Copy of most recent bank statement for every bank you have an account
- Copy of most recent retirement fund statement
- □ Copy of most recent annuity statement
- □ Copy of most recent insurance policy statement showing cash value
- □ Copy of most recent brokerage account statement
- □ Copy of most recent statement of any other financial assets
- Any other document that helps determine your ability to pay property taxes

These documents are required and **must be** submitted if they apply to your financial situation. If any of the requested documentation do not apply to your situation, please cross a line through that item and attach a brief explanation on a separate sheet of paper. All documents requiring signature must be signed** by the applicant. The Board can deny any application deemed to be incomplete.

**Section 118 of the General Property Tax Act states, "Any person who, under any of the proceedings required or permitted by this act shall willfully swear falsely, shall be guilty of perjury and subject to its penalties."

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.

PART 1: PERSONAL INFORMATION — Petitioner must list all required personal information.									
Petitioner's Name					Daytime Phone Number				
Age of	Petitioner	Marital Status		Age of Spouse	Number of Legal Dependents				
Proper	ty Address of Principal Residence	L	City	I	State	ZIP Code			
	Check if applied for Hor	mestead Pr	operty Tax Credit	Amount of Homestead Prope	rty Tax Credit		· · · · · · · · · · · · · · · · · · ·		
PAR	T 2: REAL ESTATE INF	ORMATIO	N		National Anto		<u>18.855 and a state and a</u>		
	the real estate information the real estate information of the ence of ownership of the				to provide	a deed, lan	d contract or other		
Propert	ty Parcel Code Number			Name of Mortgage Company			·		
Unpaid	Balance Owed on Principal Resid	ence	Monthly Payment	4	Length of Tin	ne at this Reside	nce		
PAR	T 3: ADDITIONAL PRO	PERTY INF	ORMATION		jan na siya	<u></u>			
List information related to any other property owned by you or any member residing in the household.									
Check if you own, or are buying, other property. If checked, comp information below.				cked, complete the	Amount of In	come Earned fro	m other Property		
	Property Address			City		State	ZIP Code		
1 -	Name of Owner(s)		mageteres -	Assessed Value Date of Last Taxes Paid Am			Amount of Taxes Paid		
	Property Address			City		State	ZIP Code		
2	Name of Owner(s)			Assessed Value	Date of Last	Taxes Paid	Amount of Taxes Paid		

			······································				····-	
PART 4: EMPLOYMEN	FINFORMATIC	DN — List your c	current emplo	oyment i	nformation.			
Name of Employer								
Address of Employer			City			State	ZIP Code	
Outlet Barrow								
Contact Person			Employer	elephone N	lumber			
PART 5: INCOME SOUR	RCES		L		a and the second second	·		
List all income sources, accounts), unemployme judgments from lawsuits income, for all persons r	nt compensations, alimony, chilo	ot limited to: sala on, disability, gov d support, friend	aries, Social ernment per	Security isions, w	/, rents, pensions, /orker's compensa	IRAs (in ation, div	dividual retiremen idends, claims and	
	Source	of Income			Monthly or Annual Income (indicate which)			
PART 6: CHECKING, SA	AVINGS AND I	NVESTMENT IN	FORMATIC	N				
accounts, postal savings persons residing at the p Name of Financial In or Investment	property.	Amount on Deposit	Current Interest Ra		Name on Accou		Value of Investment	
PART 7: LIFE INSURAN	ICE — List all p	oolicies held by a	all household	l membe	ers.	Alexan		
Name of Insured	Amount o Policy	f Monthly Payments	-		Name of Benet	me of Beneficiary		
PART 8: MOTOR VEHIC	LE INFORMA	TION	tera 1995 - Nara Angelander				• <u>••••••</u> •••••••••	
All motor vehicles (inclu within the household mu	ding motorcyc							
Make		Year	-	Mon	thly Payment	B	alance Owed	

PART 9: HOUSEHOLD OC	CUPANTS	— List all p	ersons l	ving	in the househ	old.			
First and Last Name		Age		Relationship to Applicant		Place of Employment		\$ Contribution to Family Income	
·*									
		<u> </u>				<u> </u>			
PART 10: PERSONAL DEI	BT — List al	l personal d			usehold mem	bers.	i	na na sana ana ana ing katalan na sana ana ang katalan na sana sana sana sana sana sana sa	
Creditor	Purpose	of Debt	Da of De		Original Ba	lance Mon	thly Payment	Balance Owed	
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	the state of the s								
PART 11: MONTHLY EXPE					<u>A BARANA BARA</u> P				
The amount of monthly ex necessary.	penses rela	ted to the p	orincipal	resid	ence for eac	h category	must be listed	1. Indicate N/A as	
Heating	Electric	Water					Phone		
Cable	Food	Cloth		Clothi	othing		Health Insurance		
Garbage		Daycare				Car Expense (gas, repair, etc.)			
Other (type and amount)		Other (type an	d amount)			Other (typ	Other (type and amount)		
Other (type and amount) Other (ty		Other (type and	ype and amount)			Other (typ	Other (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 property 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.

Date

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 property taxes pursuant to Michigan Compiled Law, Section 211.7u.

Printed Name

Signature

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

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 informati	on for the person owning a	nd occupying the	residence.				
Owner Name Owner Telephone Number							
Mailing Address	City		ate ZIP Code				
	Chy	316	ate ZIP Code				
PART 2: LEGAL DESIGNEE INFORMATION (Comp	lete if applicable.)						
Legal Designee Name	<u> </u>	Daytime Telephone Nu	umber				
Mailing Address	City	Sta	ate ZIP Code				
DADT 2. HOMESTEAD DRODEDTV INFORMATION							
PART 3: HOMESTEAD PROPERTY INFORMATION City or Township (check the appropriate box and enter name)	Enter information for prop	erty in which the ex County	emption is being claimed.				
City Township Village		County					
Name of Local School District							
Name of Local School District							
Parcel Identification Number	Year(s) Exemption Previousl	y Granted by Board of Re	eview				
Homestead Property Address	City	Sta	ate ZIP Code				
PART 4: AFFIRMATION OF OWNERSHIP, OCCUPA	ANCY, AND INCOME STAT	US (Check all bo	xes that apply.)				
I own the property in which the exemption is be	ing claimad						
	ing Gameu.						
The property in which the exemption is being cl	aimed is used as my home	stead. Homestea	d is generally defined				
as any dwelling with its land and buildings wher							
After establishing initial eligibility for the exempt							
I receive a fixed income solely from public assist rate of inflation, such as federal Supplemental S	lance that is not subject to s Security Income or Social Si	agnilicant annuar Acurity disability c	Increases beyond the				
	becancy meane or boolard		i retrement benents.				
PART 5: CERTIFICATION		ana la compositione de la compos					
I hereby certify to the best of my knowledge that the		· · · · · · · · · · · · · · · · · · ·	and the second				
an exemption from property taxes by reason of pove	rtv pursuant to Michigan Co	mniled I aw Sect	tion 211 7u				
	ture of Owner or Legal Designee		Date				
Gigina Gigina Gigina Gigina Gigina	tare of Owner of Legal Designee		Date				
Designee must attach a letter of authority.							
LOCAL GOVERNMENT USE ONLY (DO NOT WRITE BELOW THIS LINE)							
Approved Denied (Attach appeal instructions			ion will be posted to tax roll				
CERTIFICATION — I certify that, to the best of my	knowledge, the information	contained in this	s form is complete and				
accurate.	-		•				
Assessor Signature		Date Certified by Asses	ssor				