

Information when Applying for a Tax Foreclosure Hardship  
with the Jackson County Treasurer

A property tax owner may request additional time to pay delinquent property taxes at the foreclosure hearing. If a hardship deferral is granted by the Treasurer or by the Judge, it does not abolish an obligation to pay property taxes. It may extend the time to pay. Interest and other fees established by the Property Tax Law (Public Act 206 of 1893 as amended) will still be added to the amount you owe until that amount is paid in full. Poverty Guidelines as established by the State of Michigan, Standard Allowance for Standard Credit Computation, Table A, of form MI-1040CR-7 (see below) are considered with the Application

The 2014 Poverty Guidelines for the  
48 Contiguous States and the District of Columbia

Persons in family	Poverty guideline
1	\$11,670
2	15,730
3	19,790
4	23,850
5	27,910
6	31,970
7	36,030
8	40,090
For families with more than 8 persons, add \$4,060 for each additional person.	

The link for the Poverty Guidelines is <http://aspe.hhs.gov/poverty/14poverty.cfm>

Other requirements are:

To be eligible to be considered for a financial hardship deferral, please answer the following:

- |    |   |     |    |
|----|---|-----|----|
| 1. | Are you the legal property owner of the property? | YES | NO |
| 2. | Do you live at the property address?              | YES | NO |
| 3. | Is the property assessed as your homestead?       | YES | NO |

(HOMESTEAD means you own and occupy the home as your principal residence)

## INSTRUCTIONS FOR APPLICANT REQUESTING CONSIDERATION FOR A HARDSHIP EXEMPTION

1. Applicant must obtain the proper application from the Jackson County Treasurers Office or online at [www.co.jackson.mi.us/departments/treasurers](http://www.co.jackson.mi.us/departments/treasurers)
2. Applicants must be owners of the property and reside there.
3. Applicant must fill out application form in its entirety and return it, in person, to this office.
  - A. Must not sign it until returned.
  - B. Application must be witnessed by the panel.
4. All applicants will submit last year's copies of the following:
  - \_\_\_\_\_ Federal Income Tax Return – 1040 or 1040A.
  - \_\_\_\_\_ State Income Tax Return – MI-1040.
  - \_\_\_\_\_ Homestead Property Tax Claim – MI-1040CR.
  - \_\_\_\_\_ Michigan Driver's License or other acceptable photo identification
  - \_\_\_\_\_ Evidence of ownership of property (deed, land contract)
5. If your hardship is based upon a medical/physical/mental condition, also attach:
  - \_\_\_\_\_ Doctor's Slip
  - \_\_\_\_\_ Diagnosis
  - \_\_\_\_\_ Prognosis
  - \_\_\_\_\_ Length of Illness
  - \_\_\_\_\_ Nature of Disability due to illness
  - \_\_\_\_\_ When to return to work
6. Applicants must be registered with the Treasurers Office by 10:00 am, January 14, 2015.
7. You may have to answer questions regarding your financial affairs, your health, and the status of people living in your home before the Panel at a meeting.
8. Applicants appearing before the Panel will be administered an oath, as follows:

"Do you \_\_\_\_\_ swear and affirm that evidence and testimony you will give in your own behalf before the Panel is the truth, the whole truth, and nothing but the truth, so help you."
9. The Panel must agree to the decision in regards to the disposition of all individual poverty claims or the decision is null and void.

(You also have the option to appear before Judge Thomas Wilson at the Foreclosure hearing scheduled on February 18, 2015 at 1:00pm)
10. Applicants will be evaluated based on:

- A. Data submitted to the Panel by petitioner.
  - B. Testimony taken from petitioner and information gathered from any source the Panel may wish to use.
11. The Panel will also consider all revenue and non-revenue producing assets owned by the petitioner in its deliberation as to whether relief should be granted.  
 (You also have the option to appear before Judge Thomas Wilson at the Foreclosure hearing scheduled on February 18, 2015 at 1:00pm)

## HARDSHIP EXEMPTION APPLICATION

I \_\_\_\_\_, being the owner and resident of the property listed below, desire to apply for a Hardship under MCL211.78j of the Michigan General Property Act.

Property Description

Address \_\_\_\_\_ Parcel Tax ID# \_\_\_\_\_

Phone No. \_\_\_\_\_

Marital Status: Married \_\_\_\_\_ Single \_\_\_\_\_ Separated \_\_\_\_\_ Divorced \_\_\_\_\_  
 Widow \_\_\_\_\_ Widower \_\_\_\_\_

Age of Applicant \_\_\_\_\_

Did you apply for Homestead Property Tax Credit? (Form MI 1040CR) \_\_\_\_\_

How much was the credit? \_\_\_\_\_

Real Estate: Is home paid in full? \_\_\_\_\_

If not, what is the unpaid balance? \_\_\_\_\_

Name of the Mortgage Co \_\_\_\_\_

Monthly payments: \_\_\_\_\_

How long have you lived at this address? \_\_\_\_\_

Do you own, or are you buying other property? \_\_\_\_\_

If so, list below:

<u>Amount and date of</u>		
<u>Property Address</u>	<u>Property in the name of whom</u>	<u>Assessed Value</u>
<u>last taxes paid</u>		
_____	_____	_____
_____	_____	_____
_____	_____	_____

Gross Income from property \_\_\_\_\_

Name of Employer \_\_\_\_\_

List all Income from: Salaries, Social Security, Rents, Pension, Unemployment Compensation, Disability, Government Pensions, Dividends, Workman's Compensation, Union, Claims and Lawsuits, Alimony, Child Support, or any other source.

<u>Amount Monthly</u>	<u>Source of Income</u>

Bank Accounts and Savings: List all bank accounts owned by you or your spouse, also savings certificates, Postal Savings and Cash in deposit boxes, on hand, or on deposit in Credit Unions.

<u>Name of Bank, Savings &amp; Loan, or Postal, Savings Bank, etc. Account</u>	<u>Amount on Deposit Now</u>	<u>Whose Name is Account in</u>

<u>List all Mortgages, Land Contracts etc owned by you or your spouse: Interest Rec'd</u>	<u>Current</u>	<u>Dividends &amp; Value</u>

Motor Vehicles In Household:

1. Make \_\_\_\_\_ Year \_\_\_\_\_ Monthly Payment \_\_\_\_\_  
Balance \_\_\_\_\_
2. Make \_\_\_\_\_ Year \_\_\_\_\_ Monthly Payment \_\_\_\_\_  
Balance \_\_\_\_\_
3. Make \_\_\_\_\_ Year \_\_\_\_\_ Monthly Payment \_\_\_\_\_  
Balance \_\_\_\_\_

List below all persons living with you:

<u>Last Name</u>	<u>First Name</u>	<u>Age</u>	<u>Relationship</u>	<u>Working?</u>	<u>Monthly House Contributions</u>	<u>What is their</u>	<u>Are they</u>	<u>Monthly</u>

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Personal Debts: What do you owe?

<u>Monthly</u> <u>To Whom</u> <u>Payment</u>	<u>For What</u> <u>Balance</u>	<u>Date of Debt</u>	<u>Original</u> <u>Amount</u>

Other Monthly Obligations and Debts: Include utilities, phone, garbage, cable TV, medicines, etc.

<u>To Whom</u>	<u>Amount</u>	<u>To Whom</u>

Asset Listing: List all other assets owned or controlled by you and their value. For example: Boats, coin collections, art objects, antiques, silver, gold, etc.

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If there is any further information that you would like to add, do so here:

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**NOTICE:** Any willful misstatements or misrepresentations made on this form may constitute perjury which, under the law, is a felony punishable by fine or imprisonment.

**NOTICE:** A copy of your latest Federal Income Tax Return, State Income Tax Return, and your Homestead Property Tax Credit Claim **must be attached** as proof of income.

**NOTE:** DO NOT SIGN until witnessed by the Panel.

**NOTE:** You also have the option to appear before Judge Thomas Wilson at the Foreclosure hearing scheduled on February 18, 2015 at 1:00 pm.

STATE OF MICHIGAN )  
 ) ss.  
COUNTY OF JACKSON )

**The undersigned being duly sworn, deposes and says that the statements made in the foregoing application are true and that he/she has no money, income or property other than that mentioned herein.**

Petitioner's Signatures \_\_\_\_\_  
\_\_\_\_\_

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
Member of Show Cause Panel

**This application must be returned to the Jackson County Treasurers Office,  
no later than 10:00 am, January 14, 2015.**

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**For Show Cause Panel Only**

Disposition by Show Cause Panel: \_\_\_\_\_ Date: \_\_\_\_\_

\_\_\_\_\_ Approved \_\_\_\_\_ Denied

Show Cause Panel Signatures:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_