

**CITY OF MT. MORRIS
CITY COUNCIL AGENDA
11649 N. Saginaw Street
Mt. Morris, MI 48458
May 28th, 2024
7:00 P.M.**

1. MEETING CALLED TO ORDER: Mayor Sara Dubey

2. PLEDGE OF ALLEGIANCE

3. ROLL CALL

4. APPROVAL OF AGENDA

5. APPROVAL OF MINUTES

- a. Approval of budget workshop and regular meeting minutes from May 13th, 2024.

6. COMMUNICATIONS:

None.

7. APPROVAL OF WARRANT: Approval of Warrant #24-10 in the amount of \$68,439.23.

8. PUBLIC COMMENT (Agenda Items Only /Five Minute Time Limit).

9. UNFINISHED BUSINESS:

None.

10. NEW BUSINESS:

- a. **RESOLUTION 24-15: Adoption of Fiscal Year 2024/2025 Budget.**
b. **RESOLUTION 24-16: Set Public Hearing Date - Trash Rate.**
c. **RESOLUTION 24-17: Poverty Exemption Policy**

11. PUBLIC COMMENT (Five Minute Time Limit).

12. COUNCIL MEMBER AND STAFF COMMENTS

13. ADJOURNMENT

PLEASE SILENCE ALL CELL PHONES AND OTHER ELECTRONIC DEVICES PRIOR TO THE MEETING.

Council Minutes

May 13th, 2024.

Page Four.

Fire Chief Don Fremd stated that they are in the process of hiring another firefighter, and he has reached out to surrounding departments to participate in the Memorial Day Parade.

Police Chief Mihailoff stated they will look into the chickens over on Oakland Ave. The food truck event on May 2nd was a great turnout. Chief Mihailoff stated that the 9-1-1 \$3.00 surcharge was approved for the August ballot, and will go to a vote of the people.

ADJOURNMENT:

With no further business, the council meeting was adjourned at **7:50 p.m.**

Spencer Lewis, City Clerk

User: SPENCER
 DB: Mt Morris

GL Number	Invoice Line Desc	Vendor	Invoice Description	Amount	Check #
Fund 101 General					
Dept 000					
101-000-066.000	UNDISTRIBUTED FRINGE BENEFITS	BLUE CARE NETWORK	HEALTH CARE INSURANCE	7,817.99	
101-000-066.000	UNDISTRIBUTED FRINGE BENEFITS	HUMANA HEALTH PLAN INC	VISION/DENTAL INSURANCE	1,169.28	
101-000-256.000	DEPOSITS PAYABLE	DOUG TILDEN	COMMUNITY ROOM DEPOSIT	75.00	
101-000-256.000	DEPOSITS PAYABLE	DUKE TALLEY	COMMUNITY ROOM DEPOSIT	75.00	
		Total For Dept 000		9,137.27	
Dept 215 ADMINISTRATION					
101-215-740.000	OPERATING EXPENSE	CITY OF MT. MORRIS	PETTY CASH REIMBURSEMENT	10.00	
101-215-740.000	OPERATING EXPENSE	GCOC	CLERKS SUMMER MEETING	25.00	
101-215-740.000	OPERATING EXPENSE	PITNEY BOWES BANK INC	POSTAGE	125.56	
101-215-740.000	OPERATING EXPENSE	PITNEY BOWES, INC.	RED INK - POSTAGE MACHINE	91.29	
101-215-850.000	COMMUNICATIONS	STAR2STAR COMMUNICATIONS	PHONES	153.70	
101-215-874.000	RETIREE INSURANCE BENEFITS	BLUE CARE NETWORK	HEALTH CARE INSURANCE	2,353.76	
101-215-991.000	COPIER	US BANK EQUIPMENT FINANC	COPIER LEASE	74.55	
		Total For Dept 215 ADMINISTRATION		2,833.86	
Dept 253 TREASURER					
101-253-740.000	OPERATING EXPENSE	PITNEY BOWES BANK INC	POSTAGE	62.78	
		Total For Dept 253 TREASURER		62.78	
Dept 265 CITY HALL & GROUNDS					
101-265-740.000	OPERATING EXPENSE	MENARDS - CLIO	SUPPLIES	78.54	
101-265-740.000	OPERATING EXPENSE	MENARDS - CLIO	SUPPLIES / P.D BATHROOM	12.99	
101-265-740.000	OPERATING EXPENSE	MENARDS - CLIO	F.D. CLEANING SUPPLIES / CEMETERY CAP	11.83	
101-265-740.000	OPERATING EXPENSE	MENARDS - CLIO	F.D. COUNTER TOP	18.98	
101-265-920.000	PUBLIC UTILITIES	CONSUMERS ENERGY	CITY HALL - GAS	77.46	
101-265-920.000	PUBLIC UTILITIES	CONSUMERS ENERGY	CITY HALL - ELEC.	445.71	
		Total For Dept 265 CITY HALL & GROUNDS		645.51	
Dept 267 OTHER CITY PROPERTY					
101-267-920.000	PUBLIC UTILITIES	CONSUMERS ENERGY	PARKING LOT	63.60	
		Total For Dept 267 OTHER CITY PROPERTY		63.60	
Dept 305 POLICE DEPARTMENT					
101-305-740.000	OPERATING EXPENSE	CITY OF MT. MORRIS	PETTY CASH REIMBURSEMENT	166.44	
101-305-740.000	OPERATING EXPENSE	MENARDS - CLIO	SUPPLIES / P.D BATHROOM	11.99	
101-305-740.000	OPERATING EXPENSE	MENARDS - CLIO	P.D. BATHROOM	201.67	
101-305-740.000	OPERATING EXPENSE	MENARDS - CLIO	P.D. BATHROOM	204.48	
101-305-740.000	OPERATING EXPENSE	PITNEY BOWES BANK INC	POSTAGE	62.78	
101-305-745.000	GAS & FUEL	MID-TOWN ACQUISITION LLC	UNLEADED GAS	450.58	
101-305-745.000	GAS & FUEL	MID-TOWN ACQUISITION LLC	UNLEADED GAS	238.28	
101-305-850.000	COMMUNICATIONS	STAR2STAR COMMUNICATIONS	PHONES	87.83	
101-305-932.000	REPAIR & MAINTENANCE - VEHICL	EXTREME CLEANING PRODUCT	DETAIL ON ALL 5 POLICE CARS	250.00	
101-305-932.000	REPAIR & MAINTENANCE - VEHICL	LOUIE'S TOWING & AUTO RE	OIL CHANGE AND HEADLIGHT HOUSING #101	278.40	
101-305-932.000	REPAIR & MAINTENANCE - VEHICL	LOUIE'S TOWING & AUTO RE	RADIATOR #122 (TAHOE)	815.38	
101-305-957.000	CONFERENCES AND WORKSHOPS	MICHIGAN ASSO. OF CHIEFS	2024 FALL POLICE EXECUTIVES SCHOOL	1,195.00	
101-305-991.000	DEBT SERVICE - PRIN	US BANK EQUIPMENT FINANC	COPIER LEASE	137.23	
		Total For Dept 305 POLICE DEPARTMENT		4,100.06	
Dept 336 FIRE DEPARTMENT					
101-336-745.000	GAS & FUEL	MID-TOWN ACQUISITION LLC	UNLEADED GAS	15.72	
101-336-745.000	GAS & FUEL	MID-TOWN ACQUISITION LLC	UNLEADED GAS	8.31	
101-336-850.000	COMMUNICATIONS	STAR2STAR COMMUNICATIONS	PHONES	43.91	

GL Number	Invoice Line Desc	Vendor	Invoice Description	Amount	Check #
Fund 101 General Dept 336 FIRE DEPARTMENT					
	OPERATING EXPENSE	Total For Dept 336 FIRE DEPARTMENT		67.94	
Dept 371 CODES & ENFORCEMENT 101-371-740.000					
	OPERATING EXPENSE	MAPLE TOWNE PRINTING	HIGH GRASS AND WEED STICKERS	120.00	
		Total For Dept 371 CODES & ENFORCEMENT		120.00	
Dept 441 PUBLIC WORKS 101-441-740.000					
	OPERATING EXPENSE	JOHN DEERE FINANCIAL	CHIPPER FACE SHIELD	89.99	
	OPERATING EXPENSE	JOHN DEERE FINANCIAL	WEED TRIMMER REPLACEMENT HEAD	119.99	
	OPERATING EXPENSE	JOHN DEERE FINANCIAL	CHIPPER FACE SHIELD	89.99	
	PUBLIC UTILITIES	CONSUMERS ENERGY	DPW GARAGE	369.96	
		Total For Dept 441 PUBLIC WORKS		669.93	
Dept 567 CEMETERY 101-567-740.000					
	OPERATING EXPENSE	MENARDS - CLIO	F.D. CLEANING SUPPLIES / CEMETERY CAP	15.52	
		Total For Dept 567 CEMETERY		15.52	
Dept 790 LIBRARY 101-790-920.000					
	PUBLIC UTILITIES	CONSUMERS ENERGY	LIBRARY	398.33	
		Total For Dept 790 LIBRARY		398.33	
		Total For Fund 101 General		18,114.80	
Fund 202 Major Street Dept 474 TRAFFIC SERVICES 202-474-801.000					
	PROFESSIONAL SERVICES	GENESEE COUNTY ROAD COMM	SINGAL MAINTENANCE	105.57	
		Total For Dept 474 TRAFFIC SERVICES		105.57	
		Total For Fund 202 Major Street		105.57	
Fund 248 DOWNTOWN DEVELOPMENT AUTHORITY Dept 103 AUTHORITY BOARD 248-103-740.000					
	OPERATING EXPENSE	VIC'S PARTY RENTAL, LLC	MAY FOOD TRUCK EVENT	300.00	
		Total For Dept 103 AUTHORITY BOARD		300.00	
		Total For Fund 248 DOWNTOWN DEVELOPMENT AUTHORITY		300.00	
Fund 590 SEWER FUND Dept 215 ADMINISTRATION 590-215-740.000					
	OPERATING EXPENSE	PITNEY BOWES BANK INC	POSTAGE	125.57	
	COMMUNICATIONS	STAR2STAR COMMUNICATIONS	PHONES	65.86	
	RETIREE INSURANCE BENEFITS	BLUE CARE NETWORK	HEALTH CARE INSURANCE	816.91	
	COPIER	US BANK EQUIPMENT FINANC	COPIER LEASE	74.56	
		Total For Dept 215 ADMINISTRATION		1,082.90	
		Total For Fund 590 SEWER FUND		1,082.90	
Fund 591 Water Fund Dept 215 ADMINISTRATION 591-215-740.000					
	OPERATING EXPENSE	PITNEY BOWES BANK INC	POSTAGE	125.56	
	COMMUNICATIONS	STAR2STAR COMMUNICATIONS	PHONES	87.83	
	RETIREE INSURANCE BENEFITS	BLUE CARE NETWORK	HEALTH CARE INSURANCE	816.91	
	COPIER	US BANK EQUIPMENT FINANC	COPIER LEASE	74.56	

GL Number	Invoice Line Desc	Vendor	Invoice Description	Amount	Check #
Fund 591 Water Fund					
Dept 215 ADMINISTRATION					
Dept 537 WATER DISTRIBUTION					
591-537-725.000	FRINGE BENEFIT-NON PAYROLL	CINTAS CORP	UNIFORMS	46.62	
591-537-725.000	FRINGE BENEFIT-NON PAYROLL	CINTAS CORP	UNIFORMS	46.62	
591-537-740.000	OPERATING EXPENSE	GENESEE COUNTY DRAIN COM	WATER SAMPLING	75.00	
591-537-740.000	OPERATING EXPENSE	GREAT LAKES CONCRETE SUP	CURB REPLACEMENT AT LEAD REMOVAL LOCA	23.20	
591-537-740.000	OPERATING EXPENSE	R & R READY MIX INC.	CURB AND SIDEWALK REPLACEMENT	678.50	
591-537-745.000	GAS & FUEL	CITY OF MT. MORRIS	PETTY CASH REIMBURSEMENT	55.00	
591-537-745.000	GAS & FUEL	MID-TOWN ACQUISITION LLC	UNLEADED GAS	115.85	
591-537-745.000	GAS & FUEL	MID-TOWN ACQUISITION LLC	UNLEADED GAS	61.26	
591-537-920.000	PUBLIC UTILITIES	CONSUMERS ENERGY	METER PIT - 310 W. MT.MORRIS	36.63	
591-537-920.000	PUBLIC UTILITIES	CONSUMERS ENERGY	METER PIT - 321 LINCOLN	38.63	
591-537-921.000	COST OF WATER	GENESEE COUNTY DRAIN COM	APRIL 2024	46,406.30	
		Total For Dept 537 WATER DISTRIBUTION		47,583.61	
Dept 539 WATER REPAIR					
591-539-740.000	OPERATING EXPENSE	MICHIGAN PIPE & VALVE-IN	3/4 PJ CURB STOP	147.49	
		Total For Dept 539 WATER REPAIR		147.49	
		Total For Fund 591 Water Fund		48,835.96	

INVOICE GL DISTRIBUTION REPORT FOR CITY OF MT MORRIS
EXP CHECK RUN DATES 05/29/2024 - 05/29/2024
BOTH JOURNALIZED AND UNJOURNALIZED
BOTH OPEN AND PAID
WARRANT 24-10

GL Number	Invoice Line Desc	Vendor	Invoice Description	Amount	Check #
			Fund Totals:		
			Fund 101 General	18,114.80	
			Fund 202 Major Street	105.57	
			Fund 248 DOWNTOWN DEVE	300.00	
			Fund 590 SEWER FUND	1,082.90	
			Fund 591 Water Fund	48,835.96	
			Total For All Funds:	<u>68,439.23</u>	

City of Mt Morris
Resolution No. 24-15

A Resolution to adopt the Annual City Budget for FY 2024-2025 and to provide a general appropriations act; to permit the City Manager to execute transfers within stated limits between departments/activities without prior approval of the legislative body; and to set the annual millage rate.

WHEREAS: Chapter VII of The City Charter specifies that the City shall adopt a budget and set the millage rate for the next fiscal year not later than the second Monday in June, and

WHEREAS: The City Council held a public hearing on the proposed budget and a Truth In Taxation Hearing on Monday, May 13th, 2024.

NOW THEREFORE BE IT RESOLVED: That this council does set the levels of appropriations, estimated revenues and uses of fund balance as follows:

Amounts and Source of Monies Appropriated

GENERAL FUND

Estimated Revenues (By Source):

Property Taxes, Fees, and Interest	897,000
Licenses and Permits	70,500
Federal Grants	0
State Grants	493,500
Contributions from Local Units	2,000
Charges for Services	241,200
Fines and Forfeitures	40,500
Interest, Royalties, and Rents	10,200
Other Revenue	23,500
Operating Transfers	92,500
Fund Balance	66,849
Total	1,937,749

Expenditures:

City Council	21,050
Administration	157,125
Auditor	62,000
Treasurer	48,674
Assessor	13,850
Elections	12,478
City Hall	50,743
Attorney	50,000
Other City Property	12,389
Police Department	940,064

Fire Department	101,924
Codes & Enforcement	9,900
Public Works	119,314
Trash Collection	225,722
Weed Control	30,000
Cemetery	20,254
Planning	2,500
Library	22,162
Capital Outlay	37,600
Transfers Between Funds	0
Amount Appropriated	1,937,749

CEMETERY PERPETUAL CARE

Estimated Revenues (By Source):

Sales	300
Interest	100
Total	400

Expenditures:

Reimbursement to funds	0
Amount Appropriated	0

MAJOR STREETS

Estimated Revenues (By Source):

Act 51 Funds	325,000
Interest	1,500
Other Revenue	15,000
Fund Balance	0
Total	341,500

Expenditures:

Sidewalks	4,148
Street Construction	0
Routine Maintenance	61,962
Traffic Services	50,002
Winter Maintenance	44,562
Transfers Out	125,000
Amount Appropriated	285,674

LOCAL STREETS

Estimated Revenues (By Source):

Act 51	110,000
Interest	500
Transfers from Major Streets	100,000
Fund Balance	0
Total	210,500

Expenditures:

Sidewalks	5,330
Routine Maintenance	50,121
Traffic Services	14,241
Winter Maintenance	28,133
Amount Appropriated	97,825

DDA

Estimated Revenues (By Source):

Current Property Tax	16,000
Current Property Tax Penalty	100
Food Truck Revenue	3,000
Fund Balance	8,340
Total	27,440

Expenditures:

Authority Board	27,440
Amount Appropriated	27,440

SEWER FUND

Estimated Revenues (By Source):

Fees	4,000
Sale of Treatment	545,000
Fines & Forfeits	15,000
Interest	800
Rental	23,800
Fund Balance	0
Total	588,600

Expenditures:

Administration	159,707
Sewer Distribution	337,983
Sewer Repair	40,323
Transfers Out	33,750
Total	571,763

WATER FUND

Estimated Revenues (By Source):

Fees	7,000
Tap-in Fees	0
Turn On/Off Fee	1,000
Sale of Water	1,300,000
Fines & Forfeits	45,000
Interest	0
Rental-General Fund	4,300
Rental-Major Street	15,000
Rental-Local Street	12,000
Rental-DDA	1,000
Rental-Sewer	4,000
Other Revenue	4,000
Fund Balance	0
Total	1,393,300

Expenditures:

Administration	181,407
Water Distribution	1,009,703
Water Repair	78,223
Transfers Out	33,750
Total	1,303,083

BE IT FURTHER RESOLVED, that the City Manager may make transfers in the amount of \$5,000 between departments/activities without approval of the City Council.

Constituting, in its entirety, the total of \$4,223,534 the budget is hereby ADOPTED.

The Budget ADOPTED by virtue hereof shall constitute to the extent applicable, as required by law, an appropriations measure or act within which the City Manager may execute transfers between its appropriations within stated limits. Public funds shall be disbursed or made available pursuant to this appropriations act and shall be in accordance with applicable laws of the State of Michigan, rules and regulations promulgated by the Michigan Department of Treasury and the Charter of the City of Mt. Morris.

BE IT FURTHER RESOLVED THAT:

- 1.) The Tax rate (millage) is hereby established as follows:
 - a. 19.1183 mills for General Operating Expenditures Fund 101
 - b. 1.6549 mills for Downtown Development Authority, and;

BE IT FURTHER RESOLVED THAT:

- 1.) Any grants received will automatically authorize the City Manager to amend the budget to reflect the changes in revenues and appropriations.
- 2.) Where encumbrances are outstanding at year end they will be reported as reservations of fund balance to be used for the subsequent year's expenditures.

Moved by Council member _____, seconded by Council member _____ and thereafter ADOPTED by the City Council of the City of Mt. Morris at a regular meeting held on Monday, May 28, 2024 at 7:00 p.m.

_____Yeas

_____Nays

_____Absent

Sara Dubey, Mayor

Spencer Lewis, City Clerk

**CITY OF MT. MORRIS
RESOLUTION 24-16**

WHEREAS: Section 50 of the Code of Ordinances of the City of Mt. Morris provides that charges for solid waste, recycling and yard waste services shall be set by resolution of the City Council and provide that a public hearing shall be held prior to the enactment of such a resolution and that at least ten days notice of the public hearing shall be published in a paper of general circulation within the city indicating in addition to such other information as the Council deems appropriate, the Council's intention to increase or decrease rates and a schedule of the new rates contemplated; and

WHEREAS: This Council has determined that due to increased costs rates must be changed to consumers within the City.

NOW THEREFORE, BE IT RESOLVED:

That this Council does hereby:

1. Declare and confirm its intent to change solid waste rates.
2. That the schedule of new rates shall be as follows:

	<u>FROM</u>	<u>TO</u>
Collection fee (per unit)	\$16.79	\$17.63

BE IT FURTHER RESOLVED:

That a public notice shall be published in a paper of general circulation within the city, to wit: the Mt. Morris-Clio Herald, in a form to be approved by the Manager and City Attorney setting forth such intent and the schedule of new rates contemplated. The said public notice shall be essentially in the format annexed hereto. The public hearing shall be set for June 10, 2024 at 7:00 p.m.

Moved by Council member _____, seconded by Council member _____, and thereafter adopted by the City Council of the City of Mt. Morris at a regular meeting held Monday, May 28, 2024 at 7:00 p.m.

_____ Yea

_____ Nay

_____ Absent

Sara Dubey, Mayor

Spencer Lewis, City Clerk

**CITY OF MT. MORRIS
RESOLUTION 24-17**

WHEREAS: The adoption of guidelines for poverty exemptions is required by the Mt. Morris City Council, and

WHEREAS: The principal residence of persons, who the Board of Review determines by reason of poverty to be unable to contribute to the public charge, is eligible for exemption in whole or in part from taxation under Public Act 390 of 1994 (MCL 211.7u), and

WHEREAS: Pursuant to PA 390 of 1994 and further amended by PA 620 of 2002, the City of Mt. Morris adopts the attached policy for the Board of Review to implement. The policy shall include but not be limited to the specific income and asset levels of the claimant and all persons residing in the household, including any property tax credit returns, filed in the current or immediately preceding year, and

NOW THEREFORE BE IT RESOLVED:

That the Assessor and Board of Review shall follow the attached policy and Federal guidelines in granting or denying an exemption.

A motion was made by Council member _____, seconded by Council member _____, and thereafter adopted by the City Council of the City of Mt. Morris at a regular meeting held Monday, May 28, 2024 at 7:00 p.m.

_____ Yea

_____ Nay

_____ Absent

Sara Dubey, Mayor

Spencer Lewis, City Clerk

CITY OF MT. MORRIS REQUIREMENTS FOR POVERTY EXEMPTION

In order to be eligible for the poverty exemption, the claimant must do and meet all of the following requirements on an annual basis:

REQUIREMENTS

1. The applicant *must* own and occupy as a homestead the property for which the exemption is requested. The applicant *must* also produce a valid driver's license or other form of identification showing place of residence.
2. The applicant *must* file form 5737, Application for MCL 211.7u Poverty Exemption and form 5739, Affirmation of Ownership and Occupancy to Remain Exempt by Reason of Poverty, with the board of review as provided by the Mt Morris City Assessor's Office. It must be received between January 1 of each year and the day prior to the last scheduled meeting day of the Board of Review for that year. **Note:** The filing of this claim constitutes an appearance before the Board of Review for the purpose of preserving the right to appeal to the Michigan Tax Tribunal.
3. Applicant *must* provide federal and state income tax returns for all persons residing in the homestead including any property tax credit returns. These income tax returns may be those filed in the current year or in the immediately preceding year. Any additional information regarding the poverty application must be in writing and attached to the petition form (**Note:** If an applicant is not required to file a federal or state income tax return then they must show proof of income and file the attached affidavit (Form 4988) for all persons residing in the residence who were not required to file federal or state tax returns for the current or preceding tax year.
4. The applicant must produce a deed, land contract or other evidence of ownership of the property for which an exemption is requested to support the information provided on the Poverty Petition, if requested by the Assessor or Board of Review.
5. An applicant must meet the federal poverty guidelines for the total household income as 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, as attached. Income 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

6. Meet the asset level test, which is established to be: The claimant's and household's total assets, excluding the principal residence, do not exceed Ten Thousand dollars (\$10,000). Applicants must provide a list of all assets when applying for the poverty exemption. Assets include, but are not limited to:
 - A second home, land, vehicles • Recreational vehicles such as campers, motor-homes, boats and ATV's • Buildings other than the residence • Jewelry, antiques, artworks • Equipment, other personal property of value • Bank accounts (over a specified amount), stocks • Money received from the sale of property, such as, stocks, bonds, a house or car (unless a person is in the specific business of selling such property) • Withdrawals of bank deposits and borrowed money • Gifts, loans, lump-sum inheritances, and one-time insurance payments Page 3 • Food or housing received in lieu of wages and the value of food and fuel produced and consumed on farms • Federal non-cash benefits programs such as Medicare, Medicaid, food stamps and school lunches.
- a. The following assets are excluded from this limit:
 - i. the applicant's homestead property,
 - ii. the applicant's normal household personal property and clothing,
 - iii. one vehicle used for personal transportation and titled to a member of the household.
 - iv. assets not accessible to the applicant, co-owner, or any member of the applicant's household.
7. The Poverty Exemption applicant must provide additional relevant documentation if requested by the Assessor or Board of Review in order to fully investigate an application.

GUIDELINES FOR GRANTING POVERTY EXEMPTIONS:

MCL 211.7u(5) states that if a person claiming the poverty exemption meets all eligibility requirements, the Board of Review shall grant the poverty exemption, in whole or in part, as follows: A full exemption equal to a 100% reduction in taxable value or a partial exemption equal to a 25%, 50% or 75% reduction in taxable value for the year in which the exemption is granted.

Poverty Exemptions must be processed annually. Under no circumstances will a poverty exemption be extended for a subsequent year without renewal of the poverty petition.

APPEAL OF POVERTY EXEMPTIONS TO THE MICHIGAN TAX TRIBUNAL:

A property owner may appeal the March Board of Review's decision on a poverty exemption to the Michigan Tax Tribunal. This appeal must be made by June 30. A property owner may appeal the July Board of Review's decision or December Board of Review's decision to the Michigan Tax Tribunal within 35 days from the date of the decision. The assessor may also appeal a Board of Review's decision on a poverty exemption to the Michigan Tax Tribunal.

Federal Poverty Guidelines Used in the Determination of Poverty Exemptions for 2024

Size of Family Unit	Poverty Guidelines
1	\$14,580
2	\$19,720
3	\$24,860
4	\$30,000
5	\$35,140
6	\$40,280
7	\$45,420
8	\$50,560
For each additional person	\$5,140

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	
Property Address of Principal Residence		City	State	ZIP Code
<input type="checkbox"/> Check if applied for Homestead Property Tax Credit		Amount of Homestead Property Tax Credit		
PART 2: REAL ESTATE INFORMATION				
List the real estate information related to your principal residence. Be prepared to provide a deed, land contract or other evidence of ownership of the property at the Board of Review meeting.				
Property Parcel Code Number		Name of Mortgage Company		
Unpaid Balance Owed on Principal Residence	Monthly Payment	Length of Time at this Residence		
Property Description				
PART 3: ADDITIONAL PROPERTY INFORMATION				
List information related to any other property owned by you or any member residing in the household.				
<input type="checkbox"/> Check if you own, or are buying, other property. If checked, complete the information below.			Amount of Income Earned from other Property	
1	Property Address	City	State	ZIP Code
	Name of Owner(s)	Assessed Value	Date of Last Taxes Paid	Amount of Taxes Paid
2	Property Address	City	State	ZIP Code
	Name of Owner(s)	Assessed Value	Date of Last Taxes Paid	Amount of Taxes Paid

PART 4: EMPLOYMENT INFORMATION — List your current employment information.					
Name of Employer					
Address of Employer		City	State	ZIP Code	
Contact Person		Employer Telephone Number			
PART 5: INCOME SOURCES					
List all income sources, including but not limited to: salaries, Social Security, rents, pensions, IRAs (individual retirement accounts), unemployment compensation, disability, government pensions, worker's compensation, dividends, claims and judgments from lawsuits, alimony, child support, friend or family contribution, reverse mortgage, or any other source of income, for all persons residing at the property.					
Source of Income			Monthly or Annual Income (indicate which)		
PART 6: CHECKING, SAVINGS AND INVESTMENT INFORMATION					
List any and all savings owned by all household members, including but not limited to: checking accounts, savings accounts, postal savings, credit union shares, certificates of deposit, cash, stocks, bonds, or similar investments, for all persons residing at the property.					
Name of Financial Institution or Investments	Amount on Deposit	Current Interest Rate	Name on Account	Value of Investment	
PART 7: LIFE INSURANCE — List all policies held by all household members.					
Name of Insured	Amount of Policy	Monthly Payments	Policy Paid in Full	Name of Beneficiary	Relationship to Insured
PART 8: MOTOR VEHICLE INFORMATION					
All motor vehicles (including motorcycles, motor homes, camper trailers, etc.) held or owned by any person residing within the household must be listed.					
Make	Year	Monthly Payment	Balance Owed		

PART 9: HOUSEHOLD OCCUPANTS — List all persons living in the household.				
First and Last Name	Age	Relationship to Applicant	Place of Employment	\$ Contribution to Family Income

PART 10: PERSONAL DEBT — List all personal debt for all household members.					
Creditor	Purpose of Debt	Date of Debt	Original Balance	Monthly Payment	Balance Owed

PART 11: MONTHLY EXPENSE INFORMATION			
The amount of monthly expenses related to the principal residence for each category must be listed. Indicate N/A as necessary.			
Heating	Electric	Water	Phone
Cable	Food	Clothing	Health Insurance
Garbage	Daycare	Car Expense (gas, repair, etc.)	
Other (type and amount)	Other (type and amount)	Other (type and amount)	
Other (type and amount)	Other (type and amount)	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.

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	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

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 Name		Owner Telephone Number	
Mailing Address	City	State	ZIP Code
PART 2: LEGAL DESIGNEE INFORMATION (Complete if applicable.)			
Legal Designee Name		Daytime Telephone Number	
Mailing Address	City	State	ZIP Code
PART 3: HOMESTEAD PROPERTY INFORMATION — Enter information for property in which the exemption is being claimed.			
City or Township (check the appropriate box and enter name) <input type="checkbox"/> City <input type="checkbox"/> Township <input type="checkbox"/> Village		County	
Name of Local School District			
Parcel Identification Number		Year(s) Exemption Previously Granted by Board of Review	
Homestead Property Address	City	State	ZIP Code
PART 4: AFFIRMATION OF OWNERSHIP, OCCUPANCY, AND INCOME STATUS (Check all boxes that apply.)			
<input type="checkbox"/> I own the property in which the exemption is being claimed. <input type="checkbox"/> 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. <input type="checkbox"/> 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 property taxes by reason of poverty pursuant to Michigan Compiled Law, Section 211.7u.			
Owner or Legal Designee Name (print)		Signature of Owner or Legal Designee	Date
Designee must attach a letter of authority.			
LOCAL GOVERNMENT USE ONLY (DO NOT WRITE BELOW THIS LINE)			
<input type="checkbox"/> Approved <input type="checkbox"/> Denied (Attach appeal instructions and provide to owner.)		Tax Year(s) exemption will be posted to tax roll	
CERTIFICATION — I certify that, to the best of my knowledge, the information contained in this form is complete and accurate.			
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.

I, _____, swear and affirm by my signature below that I reside in the principal residence that is the subject of this Application for Poverty Exemption and that for the current tax year and the preceding tax year, I was not required to file a federal or state income tax return.

Address of Principal Residence: _____

Signature of Person Making Affidavit

Date