

## 2025 RESOLUTION FOR POVERTY EXEMPTION

**WHEREAS**, the adoption of guidelines for poverty exemptions is required of the City Council (Township Board); and **WHEREAS**, the principal residence of persons, who the Supervisor/Assessor and 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, the City/Township of Cohoctah, Livingston County adopts the following guidelines for the Board of Review to implement. The guidelines 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;

To be eligible, a person shall do all the following on an annual basis:

- 1) Be an owner of and occupy as a principal residence the property for which an exemption is requested.
- 2) File a claim with the supervisor/assessor or Board of Review, accompanied by 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.
- 3) File a claim reporting that the combined assets of all persons do not exceed the current guidelines. Assets include but are not limited to, real estate other than the principal residence, personal property, motor vehicles, recreational vehicles and equipment, certificates of deposit, savings accounts, checking accounts, stocks, bonds, life insurance, retirement funds, etc.
- 4) Produce a valid driver’s license or other form of identification.
- 5) Produce, if requested, a deed, land contract, or other evidence of ownership of the property for which an exemption is requested.
- 6) Meet the federal poverty income guidelines as defined and determined annually by the United States Department of Health and Human Services or alternative guidelines adopted by the governing body providing the alternative guidelines do not provide eligibility requirements less than the federal guidelines.
- 7) The application for an exemption shall be filed after January 1, but one day prior to the last day of the Board of Review. The filing of this claim constitutes an appearance before the Board of Review for the purpose of preserving the right of appeal to the Michigan Tax Tribunal.

The following are the federal poverty income guidelines which are updated annually by the United States Department of Health and Human Services. The annual allowable income includes income for all persons residing in the principal residence.

### *Federal Poverty Guidelines for the 2025 Assessment Year*

#### **Number of Persons Residing Poverty Guidelines in the Principal Residence Annual allowable income**

1 Person	\$15,060
2 Persons	\$20,440
3 Persons	\$25,820
4 Persons	\$31,200
5 Persons	\$36,580
6 Persons	\$41,960
7 Persons	\$47,340
8 Persons	\$52,720
Each additional person, add	\$5,380

## 2025 RESOLUTION FOR POVERTY EXEMPTION - Continued

The following is a limit on the amount of assets an applicant can have (or insert see attachment):

- Limit on Cash Balances: \$2,500 (check/savings). All bank statements must be submitted with application.
- 1 personal vehicle is exempt from overall asset value limit
- Primary Residence is excluded, however, excess land over 5 acres will count toward overall asset limit.
- Annual dividend income (taxable & non-taxable) must be less than \$1,000
- Overall Asset Value Limit: \$20,000

***NOW, THEREFORE, BE IT HEREBY RESOLVED*** that the supervisor/assessor and Board of Review shall follow the above stated policy and federal guidelines in granting or denying an exemption. As this policy and resolution do not establish specific guidelines for granting a 25% or 50% reduction in taxable value as allowed by MCL 211.7u, the Board of Review shall be limited to a 0% reduction (denial) or 100% reduction (approval).

The foregoing resolution offered by Board/Council Member \_\_\_\_\_

and supported by Council Member/Board Member \_\_\_\_\_.

Upon roll call vote, the following voted:

“Aye”: \_\_\_\_\_

“Nay”: \_\_\_\_\_

The City/Township Clerk declared the resolution \_\_\_\_\_.

\_\_\_\_\_  
Clerk Signature

\_\_\_\_\_, Clerk Name, Dated: \_\_\_\_\_