

# One-Year Financial Hardship Extension from Tax Foreclosure Policy & Application

The Lenawee County Treasurer does not request information on Immigration status when answering questions or providing services

Hardship Extensions are designed to delay foreclosure deadlines by one year for owners who are working actively to catch up their delinquent property taxes. Hardship Extensions are aimed at homeowners but may be granted for businesses that are the primary source of the owner's income.

The person requesting an extension must hold title to the property or represent the estate if the owner is deceased and a recent history of making regular payments.

## The application must include:

1. **Proof of Income** –pay stubs, Social Security statement, W2, or other income statement
2. **A Plan for Payment.** Use the space provided at the end of the application to describe your plan to resolve the Delinquent Taxes.
  - a. Regular payments
  - b. Assistance from a local help agency
  - c. Sale or refinancing of the property

The Treasurer will assist delinquent taxpayers to develop a payment plan as part of the application process. We can also refer you to expert, confidential budget counseling at no cost to you.

The law requires the Treasurer to review your income and allows the Treasurer to grant hardship extensions. Withholding the property from foreclosure petition is the sole judgement of the County Treasurer. We are willing to discuss your individual situation with you as part of the application process.

Granting of financial hardship status shall be for only this year's pending foreclosure. It extends only the time to pay the amount due; additional expenses, interest and penalties continue to accrue.

Erin Van Dyke, Treasurer  
Brittany Kurutz, Deputy Treasurer

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LENAWEE COUNTY TREASURER

# APPLICATION

PARCEL I.D. \_\_\_\_\_

*All information provided will be kept confidential*

## PROPERTY ADDRESS FOR WHICH RELIEF IS BEING SOUGHT

DO YOU CLAIM THIS PROPERTY AS YOUR PRINCIPAL RESIDENCE  YES  NO

APPLICANT'S NAME \_\_\_\_\_

NAME OF SPOUSE / CO-OWNER \_\_\_\_\_

APPLICANT'S MAILING ADDRESS \_\_\_\_\_

PHONE NUMBER \_\_\_\_\_ ALTERNATE PHONE \_\_\_\_\_

EMAIL ADDRESS \_\_\_\_\_

ARE YOU A MILITARY VETERAN?  YES  NO IS YOUR SPOUSE A MILITARY VETERAN?  YES  NO

## PROPERTY INFORMATION:

Purchase Date: \_\_\_\_\_ Purchase Price: \_\_\_\_\_ (if purchased in last 3 yrs)

Do you own this property free & clear?  Yes  No

If not, amount of monthly payment: \_\_\_\_\_ Name of Lender: \_\_\_\_\_

## EMPLOYMENT STATUS AND NAME OF EMPLOYER:

	EMPLOYED?		EMPLOYER NAME	ARE YOU DISABLED?	
SELF	YES <input type="radio"/>	FULL TIME <input type="radio"/>		YES <input type="radio"/>	
	NO <input type="radio"/>	PART TIME <input type="radio"/>		NO <input type="radio"/>	
SPOUSE/ CO-OWNER	YES <input type="radio"/>	FULL TIME <input type="radio"/>		YES <input type="radio"/>	
	NO <input type="radio"/>	PART TIME <input type="radio"/>		NO <input type="radio"/>	

## LIST ALL PEOPLE LIVING IN THIS HOME OTHER THAN YOU OR YOUR SPOUSE (IF THIS IS YOUR RESIDENCE)

	1	2	3	4
Name				
Age				
Relationship				
Occupation				
Annual Income				

Claimed as Dependent	<input type="radio"/> YES <input type="radio"/> NO	<input type="radio"/> YES <input type="radio"/> NO	<input type="radio"/> YES <input type="radio"/> NO	<input type="radio"/> YES <input type="radio"/> NO
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Attach additional sheet, if needed

**ASSET & EXPENSES INFORMATION**

Do you have an ownership interest in any other real estate (including ownership via partnerships, corporation, etc.)?  YES  NO If yes, please list (attach additional sheet if necessary).

Address	Value	Type of Use	Purchase Date	Purchase Price

What are your assets in addition to real estate? (Do not include sheltered retirement plans such as IRA, 401(k), 403(b), Keogh, 457, annuities or company pension programs)

- Cash \$ \_\_\_\_\_
- Savings Accounts \$ \_\_\_\_\_
- Checking Accounts \$ \_\_\_\_\_
- Stock/Bonds/Treasury Bills \$ \_\_\_\_\_
- Insurance – Cash Value \$ \_\_\_\_\_
- Other Assets \$ \_\_\_\_\_
- Personal Property held as an investment \$ \_\_\_\_\_  
(i.e., gems, jewelry, coin collections, antique cars, etc.)

**Vehicles:** Cars, Trucks, Boats, Trailers, etc.

	Make & Model	Year	Monthly Payment
#1			
#2			
#3			

Do you have any MAJOR or UNUSUAL Out of Pocket expenses? If yes, please list below.

Amount per Year	Type of Expense
\$	
\$	
\$	

**INCOME INFORMATION:**

**ESTIMATED HOUSEHOLD INCOME FOR THIS YEAR**

<b>SOURCE</b>	<b>AMOUNT PER YEAR</b>
Wages, Salaries, Tips, Sick, Strike and sub-pay, etc.	\$
Social Security / SSI Benefits Income	\$
Retirement Pension or Annuity Benefits (Includes Military Retirement Pay)	\$
Interest and/or Dividends Earned (includes non-taxable interest)	\$
Rent/Business or Royalty Income	\$
Disability Payments (Worker Comp, Veterans Disability)	\$
DHHS Benefits (Bridge card, etc.)	\$
Alimony	\$
Child Support	\$
Unemployment Benefits	\$
Other Nontaxable Income (Military Family Allotments, College Scholarships, Grants, Fellowships, Etc.)	\$
ADD INCOME FOR ALL MEMBERS OF HOUSEHOLD (not claimed as dependents) AS SHOWN ON FIRST PAGE OF APPLICATION	\$
<b>TOTAL PROJECTED HOUSEHOLD INCOME FOR THIS YEAR</b>	<b>\$</b>

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**PLEASE INCLUDE A COPY OF YOUR MOST RECENT INCOME STATEMENT (PAY STUBS, SOCIAL SECURITY STATEMENT, W-2, ETC).**

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**I DECLARE UNDER THE PENALTIES OF PERJURY, THAT ALL OF THE INFORMATION SUBMITTED IN MY APPLICATION FOR HARDSHIP EXEMPTION IS TRUE.**

**SIGNATURE:** \_\_\_\_\_

**SPOUSE OR CO-OWNER'S SIGNATURE:** \_\_\_\_\_

**DATE:** \_\_\_\_\_

