



ST. CLAIR COUNTY TREASURER

Kelly Roberts-Burnett

200 Grand River, Suite 101, Port Huron, MI 48060

(810) 989-6915 · Fax (810) 985-4795

www.stclaircounty.org · email: taxhelp@stclaircounty.org

Petition for Financial Hardship Foreclosure Postponement For 2015 Taxes

Hardship Extensions only delay foreclosure by **one year** for owners who are actively working to catch up or have applied for assistance on their delinquent property taxes. Hardship Extensions are for homeowners but may be granted at the Treasurer's discretion for small, family-owned businesses or commercial property that is the primary source of the property owner's income. The person requesting an extension must:

1. Hold title to the property or represent the estate if the owner is deceased.
2. Complete the attached application.
3. Submit a copy of the first two pages of your most recent Federal and State Tax Returns.
4. If you have not filed tax returns, please provide proof of income, unemployment, or financial hardship. (Copy of recent paystub, unemployment benefits, social security benefits, etc.)
5. Present a plan for payment of taxes due. Plans can include application for tax assistance from local resource agencies, a history of regular partial payments, or the sale or refinancing of the property.
6. Confirm the parcel is in compliance with local codes and ordinances.

The St. Clair County Treasurer's Office will recommend a monthly payment plan as part of the application process and may refer you to confidential budget counseling.

The St. Clair County Treasurer's Office will consider extenuating circumstances that create a financial hardship for you. Withholding the property from the foreclosure petition is the sole judgment 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 the current year pending foreclosure; it only extends the time to pay the amount due; **additional expenses, interest, and penalties continue to accrue.**

The last day to accept this application is February 28, 2018

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Financial Hardship Foreclosure Extension Request

For a **one (1) year** financial hardship foreclosure postponement, please provide the following information.

General Information

Applicants Name:

Name of Spouse or Co-owner:

Mailing Address:

City:

Zip Code:

Home Phone:

Cell Phone:

Email Address:

Address of Property Hardship Extension is Being Requested For (For additional Parcels see page 3)

Parcel #:

Is this property your principle residence?

Yes

No

Parcel Address:

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Property Ownership Information

Do you own or have ownership interest in other property? . (If additional space is needed, please attached an additional page

Parcel #:	<input type="text"/>	Is a Hardship Deferral required? Yes <input type="checkbox"/> No <input type="checkbox"/>
Parcel #:	<input type="text"/>	Is a Hardship Deferral required? Yes <input type="checkbox"/> No <input type="checkbox"/>
Parcel #:	<input type="text"/>	Is a Hardship Deferral required? Yes <input type="checkbox"/> No <input type="checkbox"/>
Parcel #:	<input type="text"/>	Is a Hardship Deferral required? Yes <input type="checkbox"/> No <input type="checkbox"/>

Please provide detail on the above parcel numbers (such as if it is business property, rental property, etc.)

Code and Ordinance Compliance

Have any of these parcels been cited for any code and ordinances violations or slated for demolition?

Yes No Please describe below:

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Veteran, Disabled, or Blind

Are you a veteran? Yes No

Is your spouse a veteran? Yes No

Are you disabled? Yes No

Is your spouse disabled? Yes No

Are you blind? Yes No

Is your spouse blind? Yes No

Employment and Income Information

Name of Employer:

Employment Status: Self: Full Time Part Time

Spouse: Full Time Part Time

What is your annual income:

\$

What is your spouse's annual income?

\$

Please provide a copy of your last pay stub for verification.

Are you or your spouse receiving any form of other support? Yes No

Child Support: Inheritance: Alimony: Rental: SSI: Social Security:

Other: -

Amount of other support monthly:

\$

Amount of other support spouse receives monthly:

\$

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List all persons living in this home other than you or your spouse.

	1	2	3	4	5
Name					
Age					
Relationship					
Occupation					
Annual Income					
Dependent or Minor Child					

Assistance Sought:

St. Clair County Treasurer's Office encourages all taxpayers who are requesting a hardship postponement to seek financial assistance. A list of organizations and options are below.

Have you sought assistance from the following organizations to help with your taxes?

- Blue Water Community Action Agency - (810) 982-8541
- Step Forward Michigan – you can apply for assistance through www.StepForwardMichigan.org or by contacting Blue Water Community Action Agency
- Department of Human Services
- Veteran's Administrations (for Veteran's only)
- Mortgage Company
- Have you filed your Michigan Income tax and claim a property tax credit?
- Your City or Township for the following:
 - Poverty Exemption
 - Disabled Veteran's Exemption
 - Summer Deferment
 - Poverty Exemption
 - If this is your primary residence are you getting 100% Principle Residence Exemption?

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Do you have unusual expenses that are causing you financial hardship? Please explain below. If necessary, a separate letter can be attached.

Please present a plan for payments of taxes due. Plans can include assistance for help from a local agency, a history of regular partial payments or the sale or refinancing of the property.

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Please attach the following required information: (if copies need to be made St. Clair County Treasurer's Office will assist you). **Failure to attach required documentation and complete the Application in its entirety may result in a denial of the application.**

- First two pages of your most recent Federal and State Tax Returns.
 - Proof of income (last pay stub, unemployment benefits, disability benefits, retirement benefits)
-

The above statements are true to the best of my knowledge and belief and are made for the purpose of obtaining a Hardship Deferral on my property for Delinquent Real Property Taxes. I understand I can be prosecuted for fraud if I intentionally make a false or misleading statement or misrepresent, conceal or withhold facts for the purpose of establishing or maintaining my property's eligibility.

Non-compliance of recommended payment plans or assistance counseling may result in further requests being denied.

Your Signature: _____ Date: _____

Spouse or Co-owner Signature: _____ Date: _____