

GOLDEN TOWNSHIP
JULY 14, 2015
MINUTES

The regular meeting of the Golden Township Board was called to order by the acting Chairman, Kevin Ackley, around 7:32 p.m. in the Golden Township Hall.

Board Members present: Connie Cargill, Carl Fuehring, Rachel Iteen, Kevin Ackley.

Board Members absent: Don Walsworth

Also present: Rob Draper, Zoning Administrator and 11 guests.

The Pledge of Allegiance was recited.

Motion by Mrs. Iteen, supported by Mrs. Cargill, to approve the minutes of last month's regular board meeting. All yes, the motion carried.

Motion by Mrs. Cargill, supported by Mrs. Iteen, to approve the minutes of the special board meeting on June 30th. All yes, the motion carried.

Correspondence: Anette Snyder, representing Love, INC, asked to rent the Gym for a fundraiser.

Motion by Mr. Fuehring, supported by Mrs. Cargill, to continue not renting the Township gym. The motion carried.

The Treasurer presented the Financial Report. The ending balance in the General Fund as of June 30, 2015 was \$237,898.37, and the ending balance for the Road fund was \$278,499.11.

Motion by Mrs. Iteen, supported by Mrs. Cargill, the Financial Report was accepted subject to Audit.

Motion by Mr. Fuehring, supported by Mrs. Cargill, to approve check numbers 15959 through 16002 in the amount of \$49,051.52, and to approve payment of the bills for Hart Area Fire \$26,192.00 and Accident Fund for \$1,077.00, not yet written. Roll call vote, all yes, the motion carried.

Zoning Report: There were seven permits issued. Planning Commission approved a PUD for Open Hearth Grille restaurant.

Motion by Mrs. Cargill, supported by Mr. Ackley, to approve and outdoor seating area 11'x22' for Open Hearth Grille just south of the south door into the lobby. All yes, the motion carried. Attached after minutes.

Motion by Mrs. Cargill, supported by Mrs. Iteen, to approve the Lound property land split #64-006-016-100-05. All yes, the motion carried. Attached after minutes.

The Playground is installed at the Golden Township Park at Silver Lake Sand Dunes. There have been 5 bench donations and a handicap picnic table is ordered.

Mrs. Cargill, supported by Mr. Fuehring, to approve the L-4029 Tax Rate Request millage: Operation = 1.1864, Fire = .4962, Roads = 1.9848. All yes, the motion carried.

Motion by Mr. Fuehring, supported by Mrs. Cargill to adopt the following Poverty Exemption Application, Poverty Exemption Guidelines, and Asset Guidelines. All yes, the motion carried.

PARCEL NUMBER: - _____

Township of Golden

Pursuant to Section 211.7u
Michigan Compiled Laws

This application must be filled out carefully and completely. A copy of previous year Federal Income Tax Returns, with the Michigan Property Homestead Form, **must** be submitted with this application, for each person residing in the homestead. All information supplied will be kept confidential. **All applications MUST be complete and contain accurate information or they will not be considered. Applications submitted without completed copies of actual forms or income tax returns will NOT be processed.**

Note: P.A. 135 of 2012 changed the requirements for filing documentation in support of a poverty exemption to allow an affidavit (Treasury Form 4988) to be filed for all persons residing in the residence who were not required to file federal or state income tax returns in the current year or in the immediately preceding year. This does include the owner of the property who is filing for the exemption.

CONFIDENTIAL – RESTRICTED ACCESS

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Petitioner's Name: _____

Age _____

Phone Number: _____

Address of property for which relief is being sought: _____

| | | | |
|------------------------------------|--------------------------|---------------|-----------------|
| Petitioner's Marital Status: | <input type="checkbox"/> | Married | How Long? _____ |
| | <input type="checkbox"/> | Divorced | How Long? _____ |
| | <input type="checkbox"/> | Widow/Widower | How Long? _____ |
| | <input type="checkbox"/> | Separated | How Long? _____ |
| | <input type="checkbox"/> | Single | |

Employment Status: Please check the applicable box

| | | | |
|--------------------------|---------------------|--------------------------|----------|
| <input type="checkbox"/> | Employed Full Time | <input type="checkbox"/> | Disabled |
| <input type="checkbox"/> | Employed, Part time | <input type="checkbox"/> | Retired |
| <input type="checkbox"/> | Unemployed | <input type="checkbox"/> | Laid Off |
| <input type="checkbox"/> | Other, explain | | |

Usual Occupation: _____

Employer:(Last employer if unemployed) _____

If you checked un-employed, laid off, disabled, or retired, how long have you been in this status? ____

DESCRIBE ANY DISABILITY OR HEALTH PROBLEMS YOU HAVE: _____

Spouse's Name: _____ **Age:** _____

Employment Status: Please check the applicable box

| | | | |
|--------------------------|---------------------|--------------------------|----------|
| <input type="checkbox"/> | Employed Full Time | <input type="checkbox"/> | Disabled |
| <input type="checkbox"/> | Employed, Part time | <input type="checkbox"/> | Retired |
| <input type="checkbox"/> | Unemployed | <input type="checkbox"/> | Laid Off |
| <input type="checkbox"/> | Other, explain | | |

Usual Occupation: _____

Employer:(Last employer if unemployed) _____

If your spouse is unemployed, laid off, disabled, or retired, how long has she/he been in this status? ____

DESCRIBE ANY DISABILITY OR HEALTH PROBLEMS SPOUSE MAY HAVE: _____

Other persons currently residing in homestead:

| Name | Age | Relationship | Employment status | Employer or School Attending | Dependent? | | |
|------|-----|--------------|-------------------|------------------------------|------------|----|--|
| | | | | | Yes | No | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |

Does any person listed above or any other people make a financial contribution to the household?

If yes, how much does the person contribute each month?

Person's name: _____ Amount \$ _____

Are you and/or your spouse the sole owners of this homestead? _____

If no, who else has an interest in the property? _____ Explain: _____

When did you and/or your spouse purchase this homestead? _____

What was the Purchase Price? \$ _____ Have improvements, additions, changes been made to this homestead in the past two years? _____. If yes, explain.

Is there a mortgage or land contract balance on the property? _____. If yes what is the payment amount? \$ _____

Does the payment include taxes or are they paid separately? Includes taxes Taxes are separate

What is the remaining amount due on the mortgage or land contract? \$ _____ When will it be paid off? _____

Are all outstanding taxes paid? _____ If no explain _____

Did you or your spouse seek property tax relief last year? _____

OTHER REAL ESTATE HOLDINGS:

Do you, your spouse, or any other person residing in the homestead have a financial interest in other real estate?

If yes, please provide the following information concerning that financial interest

| Location – City & State | Tax I.D. Number of Property | Value of Property | Amount of Equity |
|-------------------------|-----------------------------|-------------------|------------------|
| | | \$ | \$ |
| | | \$ | \$ |

| | | | |
|--|--|----|----|
| | | \$ | \$ |
|--|--|----|----|

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Other ASSETS AND INCOME DATA

LIST ALL SOURCES OF PERSONAL INCOME. INCOME INCLUDES ALL MONEY COMING INTO THE HOUSEHOLD FROM ANY SOURCE OR PERSON.

| Source | Annual Income | Source | Annual Income |
|----------------------|---------------|--------------------------------|---------------|
| Employment | \$ | Pension | \$ |
| Social Security | \$ | Unemployment Compensation | \$ |
| Workman's Comp | \$ | Welfare Assistance/Food Stamps | \$ |
| A.D.C. | \$ | Alimony | \$ |
| Interest & Dividends | \$ | Child Support | \$ |
| Insurance | \$ | Gifts/Other | \$ |

HOUSEHOLD INCOME

List the total income for each person residing in the household. Attach additional sheets if necessary.

| Name | Total Income in 2014 | Total expected Income in 2015 |
|---------------|----------------------|-------------------------------|
| Petitioner: | \$ | \$ |
| Spouse: | \$ | \$ |
| Other person: | \$ | \$ |
| Other Person | \$ | \$ |

ASSETS - List all assets: *Must be completed:*

| Cash | \$ | Other - describe | Net Value |
|--------------------|----|------------------|-----------|
| Savings Account(s) | \$ | | \$ |
| Checking Account | \$ | | \$ |
| Stocks & Bonds | \$ | | \$ |
| Certificates | \$ | | \$ |
| Insurance | \$ | | \$ |
| Other | \$ | | \$ |

VEHICLES - List vehicles(s) members of the homestead own / drive. Include leased vehicles.

| Driver or Owner | Year | Make | Model |
|-----------------|------|------|-------|
| | | | |
| | | | |
| | | | |

Do you anticipate any major changes in income for the coming year? _____ If yes explain below.

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EXPENSES

Monthly Household:

| | | | | | |
|------------------|----|---------------------------|----|-------------|----|
| House Payment | \$ | Water | \$ | Electricity | \$ |
| Heating –Gas/Oil | \$ | Telephone <u>LIST ALL</u> | \$ | Cable T.V. | \$ |

MONTHLY MEDICAL EXPENSES:

| Persons Name | Relationship | Hospital | Doctor | Prescriptions |
|--------------|--------------|----------|--------|---------------|
| | | \$ | \$ | \$ |
| | | \$ | \$ | \$ |
| | | \$ | \$ | \$ |

PERSONAL DEBTS:

| Person or Company | Purpose of Debt | Date Debt Incurred | Original Amount of Debt | Monthly Payment | Balance Remaining |
|-------------------|-----------------|--------------------|-------------------------|-----------------|-------------------|
| | | | \$ | \$ | \$ |
| | | | \$ | \$ | \$ |
| | | | \$ | \$ | \$ |
| | | | \$ | \$ | \$ |
| | | | \$ | \$ | \$ |
| | | | \$ | \$ | \$ |
| | | | \$ | \$ | \$ |

Do you expect to sell the homestead for which property tax relief is being sought in the next year? _____

Applicant’s Certification

I am (We are) unable to pay the full property taxes on the above described property and hereby make application for property tax relief in accordance with Section 211.7u of the Michigan Compiled Laws. I have read this application and fully understand the contents thereof. I (we) declare that the statements made herein are complete, true and correct to the best of my (our) knowledge. I (we) further understand that if any information contained herein is found to be false or incomplete, any and all relief granted by this application will be forfeited and placed back on the assessment roll with penalties and interest occurring on the additional tax liability. I (we) further understand that if this application is incomplete or I (we) fail to include all sources of income this application will not be considered by the Board of Review and that I (we) conform to the attached income and asset guidelines.

Applicant's Signature _____

Date _____

Spouse's Signature _____

Date _____

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Township of Golden
GUIDELINES FOR POVERTY EXEMPTION REVIEW

I. General Overview

The Board of Review of the Township recognizes the need to have available a procedure by which residents in need of assistance under MCL 211.7u can make an application for property tax relief. The Board further recognizes that, pursuant to statute, as well as case law, they must adopt procedures and guidelines, approved by Township Board, to be used as standards when considering appeals made based on financial hardship. The Board of Review understands that these guidelines must be adhered to when reviewing hardship appeals, and reserves the right to make individual considerations within their authority, as they feel necessary. Any form submitted that is inaccurate or not fully completed will result in a denial of the appeal. All information in the form is subject to verification from the Board or Assessors Office.

II. Basic Filing Requirements

In order to be considered for exemption under MCL 211.7u each applicant must:

- A.** Own and occupy the property as a homestead, defined by law, for which the request is being made. This may include vacant, contiguous property as long as it is considered part of the principal homestead.
- B.** Complete and submit an Application for Tax Exemption on a form designated and supplied by the Township of Branch Assessors Office.
- C.** Submit income verification as required. This must include current Federal and State Income Tax Returns, State Homestead Property Tax Credit Forms, or any additional information requested by the Board of Review.

III. Processing Applications

Once an Application for Tax Exemption is completed and returned to the Supervisor and or Assessors Office, it will be reviewed by the assessing staff. The assessing staff will complete and attach a Hardship Worksheet to each appeal. The department will summarize the application and assist the Board of Review with specific information, income of the applicant, an estimated tax amount for the property, an estimate Homestead Property Tax Credit for the property and the estimated net property tax liability to the homeowner.

The Board of Review, in making their decision, may contact the applicant for any additional information they deem necessary. The Board of Review shall also reject any application where the information contained in it appears fraudulent, misleading or incomplete.

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Township of Golden
GUIDELINES FOR POVERTY TAX EXEMPTION

IV. Income Guidelines

The income guidelines used by the Board of Review have been established in accordance with P.A. 390 of 1994 and shall be adhered to unless accompanied by special circumstances. In determining qualifications for tax exemption, the Board of Review shall consider every variable on the application, including total household income, the nature and duration of the income stream, the state equalized value of the subject property, the quality and accuracy of the information submitted and any other such evidence as they feel appropriate in making their decision. In general however these guidelines shall assist the Board of Review in their decisions.

Income guide, as adopted annually by Township Board, based on Federal Income Levels provided:

STC Bulletin No. 14 of 2014 - Changes For 2015 - dated October 13, 2014

| Size of family unit | Poverty Guidelines |
|----------------------------|--------------------|
| 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 each additional person | \$4,060 |

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Township of Golden
GUIDELINES FOR POVERTY TAX EXEMPTION

V. Asset Guidelines

As required by P.A. 390 of 1994, all guidelines for poverty exemptions as established by the governing body of the local assessing unit SHALL also include an asset level test. The following assets shall not be considered when applying an asset test to determine qualification for tax exemption.

- i. The value of the applicant's primary residence subject to the exemption request along with any contiguous residential land, **except as follows:**

An exemption shall not be granted to a property whose aggregate state equalized value exceeds the township wide average, as calculated by the Township Assessor*, unless it has been the sole primary residence of a senior citizen as defined by the Michigan Income Tax Act for the past 10 (ten) consecutive years.

*Average calculated annually.

- ii. The value of all personal property, such as furniture and clothing.

Notwithstanding the value of property listed above, in order to be considered for tax exemption under MCL 211.7u, the value of all additional assets **shall not exceed five (5) times the annual household income* of the applicant. Applicant will own one car, all other additional vehicles and recreational vehicles will be included in additional assets as indicated above. Jewelry, artwork and antiques shall be considered assets. A land footprint of more than 3 acres will be considered an asset.**

*Household income as described in Annual Federal Income Levels, as adopted by Township Board.

All asset information, as requested in the Application for Property Tax Exemption must be completed in total. The Board of Review may request additional information and verification of assets if they determine it to be necessary and **may reject** any application if assets are not properly identified.

VI. Summary

In conclusion, the Board of Review and the Township Supervisor by vote has been given exclusive jurisdiction over the granting of property tax relief due to financial hardship. The Board of Review and the Township Supervisor for the Township takes this task seriously and attempts to provide relief to all deserving residents within the Township. **The Board of Review and the Township Supervisor may deny any appeal, and/or regardless of income, and/or if the financial hardship appears to be self-created by the actions of the person or persons making the application. The Board of Review reserves the right to modify these guidelines as necessary.**

Motion by Mrs. Cargill, supported by Mr. Ackley, to table the cemetery irrigation system until more research can be done on this project. All yes, the motion carried.

Motion by Mr. Fuehring, supported by Mrs. Cargill to approve the tree removing, trimming, and stump grinding project for the Mears Cemetery in the amount of \$6675.00 Roll call vote all yes, the motion carried.

Motion by Mr. Fuehring, supported by Mrs. Cargill, to approve the doubling of the rates charged for the cemetery plots. This would change from \$100 per plot to \$200 per plot, from \$400 for 6 plots to \$800. All yes, the motion carried.

Public comments:

Ted Beattie asked about brine on roads. Mrs. Cargill stated it was done twice a year.

Ted Ferwerda asked about the proposed cell tower. His interest is in the property it would be put on. He wants to buy the south part of the property from about the creek to his property. Mr. Beggs said he heard the cell tower was going on Grace Adventure's land (one of the other properties being considered).

Rick Neilson brought before the board a problem on Saharah Trail where a garage was built a couple of feet onto the road way, and where they have a big berm of sand. Dale Lathers is insisting that they move the berm and split rail fence off the road way.

Another resident asked what could be done with keeping the channel in its proper place by moving the sand. You would have to get a permit from DEQ.

Meeting adjourned around 8:27 pm.

Respectfully submitted by,

Rachel Iteen
Golden Township Clerk