

Application for Financial Hardship Deferral

Name _____ Age _____ Name _____ (Age) _____

Address _____ City _____ State _____ Zip _____

Ages of Dependents _____

Employment:

Monthly Income:

Company _____

Address _____

Social Security _____

Social Security _____

Assistance _____

Assistance _____

Other Income List:

Total Monthly Income

If there are special conditions or circumstances you'd like considered, please list below.

When meeting with the Treasurer the applicant must provide proof of income, last 2 years of State & Federal tax forms, the Financial Statement below, and any other documents necessary to present your case.

Financial Statement - Statement of Condition as of Today's Date

Assets

Liabilities

Monthly Payment

Total Owed

Cash on Hand	\$ _____	Mortgage	\$ _____	_____
Checking Account	\$ _____	Credit Cards	\$ _____	_____
Savings Account	\$ _____	Automobile	\$ _____	_____
Savings Bonds	\$ _____	Automobile	\$ _____	_____
Stock & Security	\$ _____	Property Taxes	\$ _____	_____
Home	\$ _____			
Cash Value Life Ins.	\$ _____	Other (list)	\$ _____	_____
Automobile	\$ _____		\$ _____	_____
Automobile	\$ _____		\$ _____	_____
Furniture/Household items	\$ _____		\$ _____	_____
Boat	\$ _____		\$ _____	_____

Total Liabilities \$ _____

Retirement, Ira, 401(K)
Other Assets > \$1,000 in value (list)

Net Worth \$ _____

Total Assets: \$ _____ Total Liabilities & Net Worth \$ _____

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 homestead property for Delinquent Real Property Taxes.

Signature

Signature

Date

Date

RETURN APPLICATION TO: Financial Hardship Deferral Application, Isabella County Treasurer's office
200 N. Main, Mt. Pleasant MI 48858

FOR QUESTIONS CALL: (989) 772-0911 Ext. 258