



OFFICE OF THE WAYNE COUNTY TREASURER  
 ERIC R. SABREE, TREASURER  
 CLASS T -2018

**DISTRESSED OWNER/OCCUPANT EXTENSION APPLICATION**

**DO NOT COMPLETE THIS APPLICATION UNLESS YOU OWN AND OCCUPY THE PROPERTY AS YOUR PRINCIPAL RESIDENCE AND YOUR 2017 AND ALL PRIOR YEARS TAXES HAVE BEEN PAID IN FULL.**

**Only completed applications with ALL required documentation will be processed**

|  |                                |
|--|--------------------------------|
| Name:  | Property ID (Parcel) #:        |
| Current Mailing Address (If different from property please provide an explanation):  | Address of Property:           |
| City, State & Zip Code:  | Fax #, if any:                 |
| Daytime Telephone #:   | Best time to call:             |
| Email address, if any:   |                                |
| Are you the owner of the property?<br>YES <input type="checkbox"/> NO <input type="checkbox"/><br><small>A copy of the recorded deed or other legal document indicating ownership must accompany this application</small>  | Number of People in Household: |
| Do you occupy this property as your Principal Residence?<br>YES <input type="checkbox"/> NO <input type="checkbox"/>   |                                |
| Please briefly describe your financial distress  |                                |
| <p>I (we) hereby make application to have the property identified above withheld from the 2020 Foreclosure Petition due to financial distress, pursuant to Section 78h of the Michigan General Property Tax Act, MCL 211.78h. <u>I (we) understand that the available relief is a withholding of the property from the 2020 Foreclosure Petition, and that I (we) are responsible for the payment of the 2018 delinquent taxes, fees, penalties, and interest in FULL no later than December 17, 2021.</u></p> <p>If the property has been foreclosed, and the undersigned alleged owner of an interest in property claims the lack of required notice of due process, the Treasurer, upon signing this application hereby allows the alleged owner an extended redemption period subject to the terms and conditions of the application.</p> <p>I (we) swear and attest that the information provided is true and complete to the best of my knowledge.</p> |                                |
| Applicant's Signature _____ Date: _____  |                                |
| Spouse's Signature _____ Date: _____   |                                |
| <p><b>*Notice of our decision will be sent to the above address with 30 days of application*</b><br/> <b>If you don't receive a response within 30 days you should contact our office.</b><br/> <b>**YOU DO NOT HAVE AN EXTENSION UNLESS YOU RECEIVE AN APPROVAL LETTER**</b></p>  |                                |

Return this application to: The Office of the Wayne County Treasurer  
 Eric R. Sabree, Treasurer  
 Taxpayer Assistance Department  
 400 Monroe, 5<sup>th</sup> Floor  
 Detroit, MI 48226

**\*SEE NEXT PAGE FOR LIST OF REQUIRED DOCUMENTATION\*** Revised 09/23/2020

**Please attach to the application the following:**

1. A copy of the applicant's valid State of Michigan Driver's License or Identification Card.
2. A copy of the recorded deed or land contract or other legal document indicating ownership. If the property was awarded as part of a legal proceeding such as a probate or divorce, you must provide copies of legal documents filed with the court. (A Memorandum of Land Contract is not acceptable proof of ownership)
3. A completed and signed Distressed Owner/Occupant Extension Sworn Statement of Income.
4. Documents indicating that the applicant(s) occupies the property as his/her principal residence. (such as a utility bill or insurance bill) in the name of the applicant(s) dated within 90 days of application. WATER BILLS ARE ACCEPTABLE. Bill must be for service for the subject parcel address.

**Only completed applications with all required documentation will be processed. If any documents are missing, the application will be returned. The completed application must be received no later than March 11, 2021 at:**

Office of the Wayne County Treasurer  
Eric R. Sabree, Treasurer  
Taxpayer Assistance Department  
400 Monroe, 5<sup>th</sup> Floor  
Detroit, MI 48226

**Only applications with an original signature will be considered.**

Please contact the Office of the Wayne County Treasurer, Taxpayer Assistance Department, at (313) 224-5990 or e-mail [taxinfo@co.wayne.mi.us](mailto:taxinfo@co.wayne.mi.us) for further information.

HOUSEHOLD INCOME STANDARDS – THE OFFICE OF THE WAYNE COUNTY TREASURER

| Number of Persons Residing in Household | 2020 Standards | 2021 Standards |
|---|----------------|----------------|
| 1 person                                | \$12,490       | \$12,760       |
| 2 persons                               | \$16,910       | \$17,240       |
| 3 persons                               | \$21,330       | \$21,720       |
| 4 persons                               | \$25,750       | \$26,200       |
| 5 persons                               | \$30,170       | \$30,680       |
| 6 persons                               | \$34,590       | \$35,160       |
| 7 persons                               | \$39,010       | \$39,640       |
| 8 persons                               | \$43,430       | \$44,120       |
| Each Additional Person                  | Add \$4,420    | Add \$4,480    |

**PLEASE ALLOW 30 DAYS FOR PROCESSING**

Applications submitted after March 11, 2021 will require a down payment towards 2018 taxes in order to be processed



OFFICE OF THE WAYNE COUNTY TREASURER  
ERIC R. SABREE, TREASURER

**DISTRESSED OWNER/OCCUPANT EXTENSION**

**SWORN STATEMENT OF INCOME**

I, \_\_\_\_\_, under penalty of perjury, swear and attest the following to be true and accurate:

1. All combined income of the applicant and spouse for the household for the year 2020 was \$\_\_\_\_\_. (This amount should include any assistance received from family or the State or Federal Government, including Food Stamps)

2. That I am experiencing financial distress due to:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\*Signature

\_\_\_\_\_  
\*Date

\_\_\_\_\_  
\*Address

\_\_\_\_\_  
\*Telephone Number

**\*All information is required \***

**Do not leave the dollar amount blank or your application will be returned**

For Treasurer's Use Only

\_\_\_\_\_  
Wayne County Treasurer's Representative