

APPLICATION FOR TAX HARDSHIP REVIEW

YOU MUST ATTACH COPIES OF HOMESTEAD TAX CREDIT, STATE & FEDERAL INCOME TAX FORMS

Applicant:		Phone No:	
Address:		Age:	
Resident of Allen Park for _____ years.		Marital Status: Married___ Single___ Divorced___ Widow/Widower___	
How much cash on hand?	\$	from pension?	\$
in the bank?	\$	Other?	\$
stocks?	\$	Do you receive food stamps?	
bonds?	\$	Do you receive alimony?	\$
Land Contracts?	\$	Years remaining on mortgage?	
Room Rents? (Room & Board, including family members)	\$	Amount of monthly mortgage payments?	\$
Income	\$	Amount of annual property taxes?	\$
from insurance proceeds?	\$	Who, besides yourself, resides in your home?	
from unemployment?	\$		
from social security?	\$		

Children's Names	Age	Marital Status	Living Where?	Employed?		Annual Income	Health	Further Remarks
				Yes	No			

How many years have you applied for and received relief from the Allen Park Board of Review? _____	Did you apply last year? No___ Yes___
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I CERTIFY THAT ALL STATEMENTS MADE BY MYSELF IN THE ABOVE APPLICATION ARE TRUE AND ACCURATE.

APPLICANT'S SIGNATURE _____

DATE OF APPLICATION _____