RAISIN CHARTER TOWNSHIP AUTHORIZATION TO VERIFY POVERTY APPLICATION DATA & TO INSPECT PROPERTY (2024 application)

Parcel Number:	
Property Address:	
I/We,	accordance with Section 211.7(u)MCL. idelines and I/We fully understand the ein are complete, true, and correct to if any information contained herein is a the year, any and all relief granted by sment roll with penalties and interest a shall be considered public record. By on you hereby waive all rights and angs and documentation are subject to fownship Assessing Staff to physically
APPLICANT SIGNATURE:	DATE:
SPOUSE SIGNATURE:	DATE:
OTHER OWNERS:	DATE:
	DATE:

RAISIN CHARTER TOWNSHIP WAIVER OF CONFIDENTIALITY (2024 application)

Parcel Number:	
Property Address:	
I/we,, here my tax returns and related financial documents, including I	but not limited to those listed below, by the
Raisin Charter Township Assessor and/or her designated Charter Township:	l agent and by the members of the Raisin
Federal Income Tax Returns	
Michigan Income Tax Returns Senior Citizens Homestead Pr	
General Homestead Property	
Statements from Social Secur	
Furthermore, I consent to the discussion of the information of the inf	of the Raisin Charter Township Board of erstand and acknowledge that I am forever the disclosure of information contained in the claims may arise pursuant to Internal
All information accompanying and contained in this applic submitting this application and all supporting docume expectations of confidentiality. All Board of Review proc the provisions of the Michigan Open Meetings Act.	ntation you hereby waive all rights and
I have read this document in its entirety and sign this docu	ment of my own free will.
APPLICANT SIGNATURE:	DATE: