



# Brainerd City Council Agenda Request

**Requested Meeting Date:**

**Title of Item:**

Agenda	Action Requested:	
CONSENT AGENDA	Approve/Deny Motion	Direction Requested
P&F COMMITTEE	Adopt Resolution (attach draft)	Discussion Item
SPW COMMITTEE	Ordinance 1 <sup>st</sup> Reading	Hold Public Hearing*
MAIN AGENDA	<i>*provide copy of published hearing notice</i>	

**Submitted by:**

**Department:**

**Presenter:**

**Estimated Time Needed:**

**Summary of Issue:**

**Alternative, Options, Effects on Others/Comments:**

**Recommended Action/Motion:**

**Financial Impact:**

*Is there a cost associated with this request:*

*What is the total cost, with tax and shipping:*

*Is this budgeted? (Please Explain)*

**R E S O L U T I O N**  
**N O . 3 7 : 2 2**

**RESOLUTION ESTABLISHING CRITERIA FOR DEFERMENT OF ASSESSMENTS**

**WHEREAS**, Minnesota Statutes sections 435.193 through 435.195 authorize the City of Brainerd to defer the payment of special assessments imposed upon homestead property owned by qualified citizens; and

**WHEREAS**, said deferment of assessments may be permitted at the discretion of the City Council; and

**WHEREAS**, the City Council finds and determines that deferral of special assessments for certain citizens is in the public interest; and

**WHEREAS**, it is necessary and proper that the City Council set forth its general policies and guidelines for granting said deferrals of special assessments for property owners.

**NOW, THEREFORE, BE IT RESOLVED BY THE CITY COUNCIL OF BRAINERD, MINNESOTA:**

1. That the City Council endorses the principle of deferment of special assessments for citizens where the payment of said special assessments constitutes hardship.
2. The Council, in accordance therewith, may defer the payment of any special assessment on homestead property when payment of the assessment would create a hardship upon the property owner as defined herein.
3. The deferment may be granted upon an application by the owner on a form prescribed by the City Administrator to establish the qualifications of the owner for said deferment. All deferments shall be subject to renewal each following year upon the filing of a similar application not later than November 1. The Council shall either grant or deny the deferment, and if it grants the deferment, the deferred assessment shall bear interest at the rate established in the Resolution adopting the assessment. If the Council grants the deferment, the City Administrator shall notify the County Auditor who shall, in accordance with Minnesota Statute section 435.194, record a notice of the deferment with the County Recorder setting forth the amount of the assessment and the interest.
4. A hardship shall be deemed to exist when all of the following apply:
  - A. The combined annual gross income of the applicant's household is not in excess of the low income limits established by the Housing and Redevelopment Authority of the City of Brainerd in effect at the time of application. All data necessary to confirm applicant's income shall be furnished to the City Administrator.

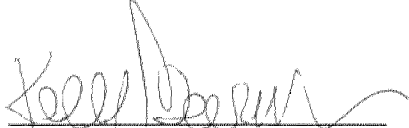
- B. The special assessments to be deferred must be multi-year assessments and the original principal amount must exceed \$300.00.
  - C. The Crow Wing County Assessor's estimated market value of the applicant's homestead is less than \$173,800 (2022 assessment median homestead value per Crow Wing County).
5. The payment of an assessment may be deferred for any homestead property owner by:
- A. A person is 65 years of age or older for whom it would be a hardship to make the payments.
  - B. A person retired by reason of permanent and total disability for whom it would be a hardship to make payments. A disability shall be deemed to exist when the applicant presents a signed letter by a licensed medical doctor attesting that the applicant is unable to be gainfully employed because of a permanent and total disability.
  - C. A person who is a member of the Minnesota National Guard or other military reserves who is ordered into active military service as defined in Section 19.05, subdivision 5b or 5c, as stated in the person's military orders for whom it would be a hardship to make the payments.
  - D. Veteran and received the market value exclusion for veterans with disability through Crow Wing County and for whom it would be hardship to make the payments with the exception of 4C.

Notwithstanding the foregoing provisions of this paragraph, the City Council may consider exceptional and unusual circumstances pertaining to an applicant not covered by the above standards; but any determination shall be made in a non-discriminatory manner and shall not give the applicant an unreasonable preference or advantage over the other applicants.


6. The option to defer the payment of special assessments shall terminate and all amounts accumulated plus applicable interest shall become due upon the occurrence of any of the following events:
- A. The death of the owner when there is no spouse who is eligible for deferment;
  - B. The sale, transfer, or subdivision of all or any part of the property;
  - C. Loss of homestead status on the property;

- D. Determination by the Council for any reason that there would be no hardship to require immediate or partial payment; or
  - E. Failure to file a renewal application with the time prescribed by Paragraph 3.
7. This Resolution supersedes Resolution No. 06:05 adopted on February 22, 2005, and Resolution No. 54:16 adopted on November 21, 2016.

Adopted this 17th day of October 2022

  
KELLY BEVANS  
President of the Council

Approved this 18th day of October 2022

  
DAVE BADEAUX  
Mayor

ATTEST:

  
JENNIFER BERGMAN  
City Administrator

**DEFERRED ASSESSMENTS  
CITY OF BRAINERD**

**APPLICATION AND AUTHORIZATION FOR DELAYED PAYMENT OF TAX ON SPECIAL ASSESSMENT FOR SENIOR CITIZENS OR DISABLED PERSONS HOMESTEAD MS. 435.193, MS. 435.194 AND/OR WHERE A FINANCIAL HARDSHIP EXISTS - RESOLUTION NO. 54:16.**

TO: Jennifer Bergman, City Administrator, City of Brainerd, Minnesota

NAME MARGARET O'ROURKE ADDRESS 928 10TH AVE NE BRAINERD MN 56401           IMP 13-19	I am (check one) <input checked="" type="checkbox"/> At least 65 years of age <input type="checkbox"/> Retired by virtue of a total or permanent disability <input type="checkbox"/> Financial hardship exists
R.E. CODE OF PROPERTY: 41191220 LEGAL DESCRIPTION OF PROPERTY: SABIN'S ADDITION TO THE CITY OF BRAINERD LOT 2 BLOCK 1	

I, the undersigned, declare under penalties of perjury:

That I, my spouse and family combined shall not have an annual gross income in excess of the low income limits established by the Housing and Redevelopment Authority of the City of Brainerd in effect at the time of the application (see attached).

That the special assessments to be deferred exceed \$300.00.

That my total assets including my spouse's exclusive of the homestead do not exceed \$25,000.00.

That the Crow Wing County Assessor's estimated market value of my homestead is less than \$110,000.

That my interest in the ownership of the above property was acquired on DECEMBER 31, 2011, and is as follows (check one):

- Sole ownership
- Joint tenancy, held with \_\_\_\_\_
- Other (specify) \_\_\_\_\_

That on December 31, 2011 I owned and occupied the above property as my homestead and such occupancy began on January 1, 2012.

That the taxes for improvements on the special assessments adopted by Resolution No. 57:14 on OCT 20, 2014, by the City of Brainerd which have been allocated against the subject property would create undue personal hardship on my behalf and I respectfully request that payment be so deferred for the installments payable in the year 2023. (NOTE: Application for deferment shall be made each year.)

I declare under penalties of perjury that the above information is correct to the best of my knowledge and belief:

Signed Margaret O'Rourke  
Owner

I, Jennifer Bergman, City Administrator of the City of Brainerd, Crow Wing County, State of Minnesota, do hereby certify that the application of <u>O'ROURKE</u> , above named, has been duly reviewed and that in accordance with the minutes of official record for the meeting held _____, 20__, in said city council chambers, was duly APPROVED or DENIED.	
That in accordance with approval granted, that the assessment on the affiant's subject property levied for annual collection composed of principal \$ <u>329.00</u> and interest, which is based on the unpaid principal balance payable in the year 20__ should be so deferred with interest at the annual rate of <u>5</u> %, until such time as it is deemed the applicant no longer qualifies or the property loses its eligibility.	
Date: _____ 20__	_____ City Administrator

DRAFTED BY:  
Pamela Ziemer  
City of Brainerd  
501 Laurel St  
Brainerd MN 56401

**DEFERRED ASSESSMENTS  
CITY OF BRAINERD**

**APPLICATION AND AUTHORIZATION FOR DELAYED PAYMENT OF TAX ON SPECIAL ASSESSMENT FOR SENIOR CITIZENS OR DISABLED PERSONS HOMESTEAD MS. 435.193, MS. 435.194 AND/OR WHERE A FINANCIAL HARDSHIP EXISTS - RESOLUTION NO. 54:16.**

TO: Jennifer Bergman, City Administrator, City of Brainerd, Minnesota

NAME MARGARET O'ROURKE ADDRESS 928 10TH AVE NE BRAINERD MN 56401      IMP 17-16	I am (check one) <input checked="" type="checkbox"/> At least 65 years of age <input type="checkbox"/> Retired by virtue of a total or permanent disability <input type="checkbox"/> Financial hardship exists
R.E. CODE OF PROPERTY: <u>41191220</u> LEGAL DESCRIPTION OF PROPERTY: <u>SABIN'S ADDITION TO THE CITY OF BRAINERD LOT 2 BLOCK 1</u>	

I, the undersigned, declare under penalties of perjury:

That I, my spouse and family combined shall not have an annual gross income in excess of the low income limits established by the Housing and Redevelopment Authority of the City of Brainerd in effect at the time of the application (see attached).

That the special assessments to be deferred exceed \$300.00.

That my total assets including my spouse's exclusive of the homestead do not exceed \$25,000.00.

That the Crow Wing County Assessor's estimated market value of my homestead is less than \$110,000.

That my interest in the ownership of the above property was acquired on 12/31, 2011, and is as follows (check one):

- Sole ownership
- Joint tenancy, held with \_\_\_\_\_
- Other (specify) \_\_\_\_\_

That on 12/31, 2011 I owned and occupied the above property as my homestead and such occupancy began on January 1, 2012.

That the taxes for improvements on the special assessments adopted by Resolution No. 51:19 on OCT 16, 2019, by the City of Brainerd which have been allocated against the subject property would create undue personal hardship on my behalf and I respectfully request that payment be so deferred for the installments payable in the year 2023. (NOTE: Application for deferment shall be made each year.)

I declare under penalties of perjury that the above information is correct to the best of my knowledge and belief:

Signed Margaret O'Rourke  
Owner

I, Jennifer Bergman, City Administrator of the City of Brainerd, Crow Wing County, State of Minnesota, do hereby certify that the application of O'ROURKE, above named, has been duly reviewed and that in accordance with the minutes of official record for the meeting held \_\_\_\_\_, 20\_\_, in said city council chambers, was duly APPROVED or DENIED.

That in accordance with approval granted, that the assessment on the affiant's subject property levied for annual collection composed of principal \$ 386.17 and interest, which is based on the unpaid principal balance payable in the year 20\_\_ should be so deferred with interest at the annual rate of 5%, until such time as it is deemed the applicant no longer qualifies or the property loses its eligibility.

Date: \_\_\_\_\_ 20\_\_.

\_\_\_\_\_  
City Administrator

DRAFTED BY:  
Pamela Ziemer  
City of Brainerd  
501 Laurel St  
Brainerd MN 56401 \_\_\_\_\_

**DEFERRED ASSESSMENTS  
CITY OF BRAINERD**

**APPLICATION AND AUTHORIZATION FOR DELAYED PAYMENT OF TAX ON SPECIAL ASSESSMENT FOR SENIOR CITIZENS OR DISABLED PERSONS HOMESTEAD MS. 435.193, MS. 435.194 AND/OR WHERE A FINANCIAL HARDSHIP EXISTS - RESOLUTION NO. 54:16.**

TO: Jennifer Bergman, City Administrator, City of Brainerd, Minnesota

NAME GARRY SCHWARTZ & ALEX SCHWARTZ ADDRESS 1212 MAPLE STREET BRAINERD MN 56401	I am (check one) <input checked="" type="checkbox"/> At least 65 years of age <input checked="" type="checkbox"/> Retired by virtue of a total or permanent disability <input checked="" type="checkbox"/> Financial hardship exists
R.E. CODE OF PROPERTY: <u>41300682</u> LEGAL DESCRIPTION OF PROPERTY: <u>SLEEPERS ADDITION TO BRAINERD LOT 4 BLOCK 9</u>	

I, the undersigned, declare under penalties of perjury:

That I, my spouse and family combined shall not have an annual gross income in excess of the low income limits established by the Housing and Redevelopment Authority of the City of Brainerd in effect at the time of the application (see attached).

That the special assessments to be deferred exceed \$300.00.

That my total assets including my spouse's exclusive of the homestead do not exceed \$25,000.00.

That the Crow Wing County Assessor's estimated market value of my homestead is less than \$110,000.

That my interest in the ownership of the above property was acquired on May 9, 1986 and is as follows (check one):

Sole ownership  
 Joint tenancy, held with Alex Schwartz (Deceased)  
 Other (specify) \_\_\_\_\_

That on Jan 1, 2022 I owned and occupied the above property as my homestead and such occupancy began on June 1, 1986.

That the taxes for improvements on the special assessments adopted by Resolution No. 50:16 on OCT 17, 2016, by the City of Brainerd which have been allocated against the subject property would create undue personal hardship on my behalf and I respectfully request that payment be so deferred for the installments payable in the year \_\_\_\_\_. (NOTE: Application for deferment shall be made each year.)

I declare under penalties of perjury that the above information is correct to the best of my knowledge and belief:

Signed X [Signature]  
Owner

I, Jennifer Bergman, City Administrator of the City of Brainerd, Crow Wing County, State of Minnesota, do hereby certify that the application of <u>SCHWARTZ</u> , above named, has been duly reviewed and that in accordance with the minutes of official record for the meeting held _____, 20__, in said city council chambers, was duly APPROVED or DENIED.	
That in accordance with approval granted, that the assessment on the affiant's subject property levied for annual collection composed of principal \$ <u>235.10</u> and interest, which is based on the unpaid principal balance payable in the year 20__ should be so deferred with interest at the annual rate of <u>4.25</u> %, until such time as it is deemed the applicant no longer qualifies or the property loses its eligibility.	
Date: _____ 20__	_____ City Administrator

DRAFTED BY:  
 Pamela Ziemer  
 City of Brainerd  
 501 Laurel St  
 Brainerd MN 56401 \_\_\_\_\_

**DEFERRED ASSESSMENTS  
CITY OF BRAINERD**

**APPLICATION AND AUTHORIZATION FOR DELAYED PAYMENT OF TAX ON SPECIAL ASSESSMENT FOR SENIOR CITIZENS OR DISABLED PERSONS HOMESTEAD MS. 435.193, MS. 435.194 AND/OR WHERE A FINANCIAL HARDSHIP EXISTS - RESOLUTION NO. 54:16.**

TO: Jennifer Bergman, City Administrator, City of Brainerd, Minnesota

NAME GUY R. GREEN ADDRESS 1004 H STREET BRAINERD MN 56401	I am (check one) <input checked="" type="checkbox"/> At least 65 years of age <input type="checkbox"/> Retired by virtue of a total or permanent disability <input checked="" type="checkbox"/> Financial hardship exists
R.E. CODE OF PROPERTY: <u>41191721</u> CITY IMP 17-06	
LEGAL DESCRIPTION OF PROPERTY: <u>EAST SIDE ADDITION TO THE CITY OF BRAINERD LOTS 8 THRU 10 BLOCK 1 INCLUSIVE</u>	

I, the undersigned, declare under penalties of perjury:

That I, my spouse and family combined shall not have an annual gross income in excess of the low income limits established by the Housing and Redevelopment Authority of the City of Brainerd in effect at the time of the application (see attached).

That the special assessments to be deferred exceed \$300.00.

That my total assets including my spouse's exclusive of the homestead do not exceed \$25,000.00.

That the Crow Wing County Assessor's estimated market value of my homestead is less than \$110,000.

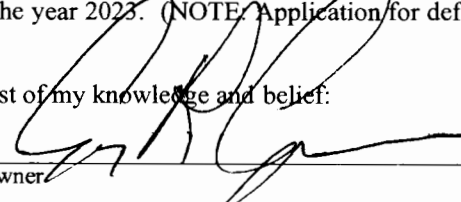
That my interest in the ownership of the above property was acquired on September, 2007, and is as follows (check one):

Sole ownership  
 Joint tenancy, held with \_\_\_\_\_  
 Other (specify) \_\_\_\_\_

That on OCT 10, 2022 I owned and occupied the above property as my homestead and such occupancy began on \_\_\_\_\_.

That the taxes for improvements on the special assessments adopted by Resolution No. 51:19 on OCT 16, 2019, by the City of Brainerd which have been allocated against the subject property would create undue personal hardship on my behalf and I respectfully request that payment be so deferred for the installments payable in the year 2023. (NOTE: Application for deferment shall be made each year.)

I declare under penalties of perjury that the above information is correct to the best of my knowledge and belief:

Signed   
Owner

I, Jennifer Bergman, City Administrator of the City of Brainerd, Crow Wing County, State of Minnesota, do hereby certify that the application of <u>GREEN</u> , above named, has been duly reviewed and that in accordance with the minutes of official record for the meeting held _____, 2022, in said city council chambers, was duly APPROVED or DENIED. That in accordance with approval granted, that the assessment on the affiant's subject property levied for annual collection composed of principal \$ <u>436.31</u> and interest, which is based on the unpaid principal balance payable in the year 2023 should be so deferred with interest at the annual rate of <u>3.3</u> %, until such time as it is deemed the applicant no longer qualifies or the property loses its eligibility. Date: _____ 2022. <p style="text-align: right;">_____ City Administrator</p>
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DRAFTED BY:  
Pamela Ziemer  
City of Brainerd  
501 Laurel St  
Brainerd MN 56401



**DEFERRED ASSESSMENTS  
CITY OF BRAINERD**

**APPLICATION AND AUTHORIZATION FOR DELAYED PAYMENT OF TAX ON SPECIAL ASSESSMENT FOR SENIOR CITIZENS OR DISABLED PERSONS HOMESTEAD MS. 435.193, MS. 435.194 AND/OR WHERE A FINANCIAL HARDSHIP EXISTS - RESOLUTION NO. 54:16.**

TO: Jennifer Bergman, City Administrator, City of Brainerd, Minnesota

NAME GUY R. GREEN ADDRESS 1004 H STREET BRAINERD MN 56401	I am (check one) <input checked="" type="checkbox"/> At least 65 years of age <input type="checkbox"/> Retired by virtue of a total or permanent disability <input checked="" type="checkbox"/> Financial hardship exists
R.E. CODE OF PROPERTY: <u>41191721</u> CITY IMP <u>17-07</u>	
LEGAL DESCRIPTION OF PROPERTY: <u>EAST SIDE ADDITION TO THE CITY OF BRAINERD</u> <u>LOTS 8 THRU 10 BLOCK 1 INCLUSIVE</u>	

I, the undersigned, declare under penalties of perjury:

That I, my spouse and family combined shall not have an annual gross income in excess of the low income limits established by the Housing and Redevelopment Authority of the City of Brainerd in effect at the time of the application (see attached).

That the special assessments to be deferred exceed \$300.00.

That my total assets including my spouse's exclusive of the homestead do not exceed \$25,000.00.

That the Crow Wing County Assessor's estimated market value of my homestead is less than \$110,000.

That my interest in the ownership of the above property was acquired on September, 2008, and is as follows (check one):

- Sole ownership
- Joint tenancy, held with \_\_\_\_\_
- Other (specify) \_\_\_\_\_

That on Sept. 2008 I owned and occupied the above property as my homestead and such occupancy began on Sept. 2008.

That the taxes for improvements on the special assessments adopted by Resolution No.51:19 on OCT 16, 2019, by the City of Brainerd which have been allocated against the subject property would create undue personal hardship on my behalf and I respectfully request that payment be so deferred for the installments payable in the year 2023. (NOTE: Application for deferment shall be made each year.)

I declare under penalties of perjury that the above information is correct to the best of my knowledge and belief.

Signed [Signature]  
Owner

I, Jennifer Bergman, City Administrator of the City of Brainerd, Crow Wing County, State of Minnesota, do hereby certify that the application of GREEN, above named, has been duly reviewed and that in accordance with the minutes of official record for the meeting held \_\_\_\_\_, 2022, in said city council chambers, was duly APPROVED or DENIED.

That in accordance with approval granted, that the assessment on the affiant's subject property levied for annual collection composed of principal \$ 772.34 and interest, which is based on the unpaid principal balance payable in the year 2023 should be so deferred with interest at the annual rate of 3.3 %, until such time as it is deemed the applicant no longer qualifies or the property loses its eligibility.

Date: \_\_\_\_\_ 20\_\_\_\_\_  
City Administrator

DRAFTED BY:  
Pamela Ziemer  
City of Brainerd  
501 Laurel St  
Brainerd MN 56401 \_\_\_\_\_

**DEFERRED ASSESSMENTS  
CITY OF BRAINERD**

**APPLICATION AND AUTHORIZATION FOR DELAYED PAYMENT OF TAX ON SPECIAL ASSESSMENT FOR SENIOR CITIZENS OR DISABLED PERSONS HOMESTEAD MS. 435.193, MS. 435.194 AND/OR WHERE A FINANCIAL HARDSHIP EXISTS - RESOLUTION NO. 54:16.**

TO: Jennifer Bergman, City Administrator, City of Brainerd, Minnesota

NAME STEGORA, SYLVESTER & MARY SUE STEGORA ADDRESS 1310 ST. LOUIS AVE BRAINERD MN 56401	I am (check one) <input type="checkbox"/> At least 65 years of age <input checked="" type="checkbox"/> Retired by virtue of a total or permanent disability <input type="checkbox"/> Financial hardship exists
R.E. CODE OF PROPERTY: 41250875	
LEGAL DESCRIPTION OF PROPERTY: DAVIS ADDITION TO THE CITY OF BRAINERD LOTS 2 THRU 4 INCLUSIVE AND ALSO INCLUDING THAT PART OF THE ADJACENT VACATED ALLEY IN BLOCK 16	

I, the undersigned, declare under penalties of perjury:

That I, my spouse and family combined shall not have an annual gross income in excess of the low income limits established by the Housing and Redevelopment Authority of the City of Brainerd in effect at the time of the application (see attached).

That the special assessments to be deferred exceed \$300.00.

That my total assets including my spouse's exclusive of the homestead do not exceed \$25,000.00.

That the Crow Wing County Assessor's estimated market value of my homestead is less than \$110,000.

That my interest in the ownership of the above property was acquired on September 26, 1991, and is as follows (check one):

- Sole ownership  
 Joint tenancy, held with \_\_\_\_\_  
 Other (specify) \_\_\_\_\_

That on 12/31, 2021 I owned and occupied the above property as my homestead and such occupancy began on 9/26/91.

That the taxes for improvements on the special assessments adopted by Resolution No. 55:21 on Sept 21, 2021, by the City of Brainerd which have been allocated against the subject property would create undue personal hardship on my behalf and I respectfully request that payment be so deferred for the installments payable in the year \_\_\_\_\_. (NOTE: Application for deferment shall be made each year.)

I declare under penalties of perjury that the above information is correct to the best of my knowledge and belief:

Signed *Sylvester R. Stegora*  
Owner

<p>I, Jennifer Bergman, City Administrator of the City of Brainerd, Crow Wing County, State of Minnesota, do hereby certify that the application of <u>STEGORA</u>, above named, has been duly reviewed and that in accordance with the minutes of official record for the meeting held _____, 20__, in said city council chambers, was duly APPROVED or DENIED.</p> <p>That in accordance with approval granted, that the assessment on the affiant's subject property levied for annual collection composed of principal \$ <u>307.06</u> and interest, which is based on the unpaid principal balance payable in the year 20__ should be so deferred with interest at the annual rate of <u>2.83</u> %, until such time as it is deemed the applicant no longer qualifies or the property loses its eligibility.</p> <p>Date: _____ 20__.</p> <p align="right">_____ City Administrator</p>
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DRAFTED BY:  
Pamela Ziemer  
City of Brainerd  
501 Laurel St  
Brainerd MN 56401 \_\_\_\_\_