

TRANSFER REQUEST AND DECLARATION FARMLAND DEVELOPMENT RIGHTS AGREEMENT (P.A. 116)

Please complete and return with all required documentation to:

Email: MDARD-PA116@Michigan.gov

Fax: 517-335-3131

Mail: MDARD-FARMLAND P.O. BOX 30449 LANSING, MI 48909

Transfers may be requested <u>ONLY IF **ALL** LAND COVERED BY THE AGREEMENT</u> is conveyed to the new owner(s); IF NOT or you are UNSURE, **STOP**. (See SPLITTING FARMLAND DEVELOPMENT RIGHTS AGREEMENTS or EARLY TERMINATION at <u>Michigan.gov/Farmland</u>).

All items must be completed with the <u>REQUIRED DOCUMENTATION</u> attached.

NAME OF PERSON MAKING REQUI	EST:				
(request contact name)					
MAILING ADDRESS:					
CITY:	STATE:	ZIP CODE:			
E-MAIL ADDRESS (preferred):		PHONE:			
REQUIRED DOCUMENTATION: (1) A one ownership transfer of the land covparcels of land, provide all deeds, land sales; (2) If the transfer is due to death required if your name was not listed or	rered by the agreement has occuri of contracts, and/or death certificate on, provide a copy of the death certi	red due to divisions into smaller es used for the land transfers and ficate. A copy of the deed is			
1) Agreement Number:	<u>-</u>				
You may obtain the Agreement number Deeds in the County the land is locat		Agreement from the Register of			
Parcel Number(s) Property Tax ID located on tax bills					
2) Name(s) as they appear on the	current Agreement:				
3) List new owner name(s) exactly 3a) FOR INDIVIDUAL(S)	as they appear on the deed or la	and contract:			
1.	2.				
3.	4.				
3b) FOR A PARTNERSHIP/LLC/CORPORATION/TRUST					
Name of entity exactly as it appears of	on deed or land contract:				
List all Partners/Members/Officers/	Trustees – Indicate title after na	me.			
1.	2.				
3.	4.				

STREET ADDRESS:				
CITY:		STATE:		ZIP CODE:
PHONE:	CELL:		E-MA	AIL:
Agreement with the Michig of Michigan, pursuant to Pet al. The undersigned as 1. That they will hone 2. That they will assuprovisions provide	d in accordance with togan Department of Agart 361 of the Naturals Buyers of the subjector and observe all corume all responsibilities do by law, until such ti	griculture and Ru I Resources and ct property declar nditions and restr s of the Agreeme me the Agreeme	ral Deve Environi e and st ictions c ent, inclu nt expire	ontained in the Agreement; and ding all payback and penalty es or is terminated.
All new landowner(s) are recopy of the legal documen	. •	. If you are signi	ng on be	ehalf of the landowner(s), attach a
Signature:				Date:
(New Landowner,	Power of Attorney, or Pers	sonal Representative	·)	
Print Name:				_
Signature:				 Date:
Signature:(New Landowner, I	Power of Attorney, or Pers	sonal Representative	·)	
Signature:	Power of Attorney, or Pers	sonal Representative	·)	
Signature:(New Landowner, Print Name:	Power of Attorney, or Pers	sonal Representative	·)	
Signature:(New Landowner, I Print Name: Signature:	Power of Attorney, or Pers	sonal Representative)	_
Signature:(New Landowner, Print Name: Signature:	Power of Attorney, or Pers	sonal Representative)	_
Signature:(New Landowner, Print Name: Signature:(New Landowner, Print Name:	Power of Attorney, or Pers	sonal Representative)	_

For more information, visit Michigan.gov/Farmland, or contact our office at 517-284-5663.