



Michigan Department of Natural Resources – Forest Resources Division

COMMERCIAL FOREST (CF) PROGRAM APPLICATION TO WITHDRAW LAND

By authority of Part 511, 1994 PA 451, as amended.

DNR Cashier's Use Only

Application Number:

IMPORTANT INFORMATION:

- Application will be canceled if treasurer does not receive penalty payment by December 1 in the year following the application year.
- Enclose a copy of your deed as proof of ownership.
- Commercial Forest (CF) land must remain compliant (including open to the public for hunting and fishing) until the Department of Natural Resources (DNR) notifies applicant land is officially withdrawn.
- If applicant is not withdrawing all their CF land, their remaining CF land must be compliant and eligible to remain in the program.
- Land splits of less than 40 acres may require township approval. The DNR may require a certified survey for partial withdrawals.
- Penalty payment usually increases every year due to the inflation rate multiplier. The application fee is nonrefundable.
- You will be billed CF property taxes the year of the withdrawal and ad valorem taxes the following year.
- Information about withdrawals (including the penalty table) can be found at www.Michigan.gov/CommercialForest, "How to Withdraw".
- If questions, contact DNR, Forest Resources Division, at 517-284-5849 or maidlowk@michigan.gov.

APPLICANT (LANDOWNER AS LISTED ON DEED)

Company/Group/Trust Name (If applicable)		Contact for Company/Group/Trust	
Landowner or Contact for Multiple Owners (Husband and wife can be listed together)			
Address			
City, State, ZIP Code			
Primary Telephone Number		E-mail	

ADDITIONAL OWNERS LISTED ON DEED (ATTACH ADDITIONAL PAGES IF NECESSARY)

Name		Name	
Address		Address	
City, State, ZIP Code		City, State, ZIP Code	
Primary Telephone Number	E-mail	Primary Telephone Number	E-mail

APPLICATION FEE

A nonrefundable application fee must be submitted with this application in addition to a copy of your deed (do not send the penalty payment to the township treasurer until DNR instructs you to do so):

- 200 acres or less – \$200
- Over 200 acres – \$1.00 per acre with a maximum application fee of \$1,000

Make check or money order payable to "State of Michigan" and mail with completed application to:

**CASHIER'S OFFICE
MICHIGAN DEPARTMENT OF NATURAL RESOURCES
P.O. BOX 30451
LANSING, MI 48909**

*To expedite, email your application and deed to maidlowk@michigan.gov in addition to mailing it to the Cashier's Office.

LAND DESCRIPTIONS (ATTACH ADDITIONAL PAGES IF NECESSARY)

County	Township	Town	Range	Section	Acres
<i>Land Description:</i>					

County	Township	Town	Range	Section	Acres
<i>Land Description:</i>					

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<i>Land Description:</i>					

All owners must sign in the presence of a notary public. Attach additional pages if necessary.

I swear under oath that I own the land described herein and have requested that it to be withdrawn from the commercial forest program.

_____ (Signature)

By: _____ (Type or print name)

Before me, the undersigned, a notary public in and for said county and State, on this _____ day of _____, 20_____, personally appeared _____ to me personally known, who being duly sworn did say that they executed the same as their free and voluntary act and deed.

_____, Notary Public
State of _____ County of _____
My Commission Expires: _____
Acting in County of _____

I swear under oath that I own the land described herein and have requested that it to be withdrawn from the commercial forest program.

_____ (Signature)

By: _____ (Type or print name)

Before me, the undersigned, a notary public in and for said county and State, on this _____ day of _____, 20_____, personally appeared _____ to me personally known, who being duly sworn did say that they executed the same as their free and voluntary act and deed.

_____, Notary Public
State of _____ County of _____
My Commission Expires: _____
Acting in County of _____

I swear under oath that I own the land described herein and have requested that it to be withdrawn from the commercial forest program.

_____ (Signature)

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Before me, the undersigned, a notary public in and for said county and State, on this _____ day of _____, 20_____, personally appeared _____ to me personally known, who being duly sworn did say that they executed the same as their free and voluntary act and deed.

_____, Notary Public
State of _____ County of _____
My Commission Expires: _____
Acting in County of _____