



# Qualified Forest Program Transfer Form

## Owner Information for Qualified Forest Program Transfer

Name of Previous Owner(s):					
Name of New Owner(s):					
Last 4 digits of SSN or FEIN:					
Mailing address:					
City:		State:		ZIP Code:	
Phone:					
Email:					

## Property Information for Qualified Forest Program Transfer

County:					
Township:					
Municipality (if applicable):					

Tax Parcel ID Number	Acres

To list additional parcels, please continue your list on additional transfer forms.

**Required documentation:**

- Copy of executed deed or land contract conveying the land from the previous landowner to the new landowner
- Copy of Forest Management Plan

Return via email at [MDARD-QFP@michigan.gov](mailto:MDARD-QFP@michigan.gov), fax at 517-335-3131, or by mail to: MDARD-QFP, PO Box 30017, Lansing, MI 48909. Please call the Qualified Forest Program office at (517) 284-5630 with any questions.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_