

Michigan Department of Natural Resources - Grants Management **Michigan Natural Resources Trust Fund Program**

STATEMENT OF JUST COMPENSATION

Required By Act 451, P.A. 1994, as amended, and Act 227 of 1972. Submission is required for payment/reimbursement.

This document is used for land acquisition grants under the Michigan Natural Resources Trust Fund (MNRTF). A separate *Statement of Just Compensation* form is required for each seller. Upon completion of the *Statement of Just Compensation* form by the local government and the landowner(s), signature by the local unit of government's representative and all landowners (or their legal representative) is required.

| SECTION A: PROJECT DESCR | RIPTION (to be completed | by the local government) | | |
|--|---|---|--|--|
| MNRTF Project Number: TF | MNRTF Project Title: | | | |
| Grantee (local government pursuing the a | acquisition): | Name of Grantee's Representative: | | |
| Project Description/Purpose of the acquis | sition: | 1 | | |
| Acreage to be acquired: | County of the real property: | County of the real property: | | |
| Owners of the real property based on title a. | records: | | | |
| b. c. | | | | |
| SECTION B: LEGAL DESCRIP | TION (to be completed by | the local government) | | |
| | | this Statement of Just Compensation form and reviewed by attement of Just Compensation form is signed. | | |
| SECTION C: JUST COMPENSA | ATION (to be completed by | the local government) | | |
| An increase or decrease in the market by the likelihood that the property work | et evaluation caused by the publicule uld be acquired for such improve | y, its highest and best use, and current land sales of similar properties. c improvement or the project for which the property is to be acquired, or ment or project, other than that due to the physical deterioration of the rded in making the determination of just compensation. | | |
| Just Compensation, which is -Approved Fair Market Value, | | Natural Resources | | |
| | | vements, severance, if any, and other elements, | | |
| Land and Improvements: | \$ | Amount includes buildings, structures or other improvements | | |
| Less Damage to the Remaind | der: \$ | | | |
| Less/Plus Other: | \$ | | | |
| Tot | tal: \$ | Must be amount shown in Section C (1) above | | |
| SECTION D: FEE SIMPLE TITE | | | | |
| ONE OF THE FOLLOWING BO | | | | |
| | title free of all liens, encumbra | nces, and restrictions and with no interests reserved by the landowner. | | |
| OR Acquisition is subject to the foll Describe below: | llowing easements or restriction | ns or interests or rights to be reserved by the landowner. * | | |
| Describe below. | | | | |
| | | interests by the landowner must have prior approval by the DNR. roceed with the acquisition without written approval from the DNR. | | |

STATEMENT OF JUST COMPENSATION (Continued)

| SECTION E: OCCUPANTS (to be completed by the landowner) | | | | | | |
|---|-------------------------------------|----------------------------------|------------------------------|-----------------------|--|--|
| The following persons are occ | upying the property as <u>separ</u> | rate households or are co | nducting <u>business</u> act | iivities: | | |
| 1. Name of Occupant | 2. Name of Occupant | 2. Name of Occupant | | 3. Name of Occupant | | |
| Address of Occupant | Address of Occupa | nt | Address of Occupant | | | |
| / (da. 000 0. 000apa | / taa 000 01 0 000 pa | Address of Goodpane | | , ladisas ar escapain | | |
| City State | ZIP code City | State ZIP code | City | State ZIP code | | |
| TYPE OF OCCUPANCY: | TYPE OF OCCUPAN | CY· | TYPE OF OCCUPANCY: | | | |
| ☐ Household ☐ Lease ☐ Business ☐ Renta | ☐ Household | Lease | ☐ Household ☐ Business | ☐ Lease ☐ Rental | | |
| SECTION F: GRANTEE CERTIF | _ | | | ☐ IXeritai | | |
| 1. The Just Compensation an | • | approved appraisal prepar | ed for the local govern | | | |
| 2. The landowners were given the opportunity to accompany the appraiser. | | | | | | |
| 3. The local unit government is prepared to commence with negotiations for the purchase of this property. | | | | | | |
| 4. The local government will ensure all occupants of the property are made aware of the potential relocation benefits. | | | | | | |
| 5. The local government will pay all incidental costs associated with the acquisition, unless the landowner(s) waives this requirement in writing. | | | | | | |
| 6. This is <u>NOT</u> an offer to purchase. | | | | | | |
| Grantee's Representative Signa | ture | Date | | | | |
| SECTION G: LANDOWNER(S) | CERTIFICATION (to be comp | leted by the landowner) | | | | |
| 1. I was offered the opportu | nity to accompany the appra | iser over the subject land | | | | |
| 2. I have received a copy of this <i>Statement of Just Compensation</i> form, fully reviewed it, and have been advised of my rights under P.L. 91-646. | | | | | | |
| By signing of this statement, I acknowledge that I have completed Sections E and G. My signature acknowledges receipt of the completed Statement of Just Compensation form and places me under no obligation. | | | | | | |
| LANDOWNER(S) SIGNATUR | ES: | | | | | |
| I or my representative ☐ DID ☐ DID NOT accompany the appraiser. (one of these boxes must be checked) | | | | | | |
| a) Landowner or Owner's | Legal Representative Signatu | ire | Date | | | |
| I or my representative | DID ☐ DID NOT accomp | oany the appraiser. (one | OF THESE BOXES MUS | T BE CHECKED) | | |
| b) Landowner or Owner's | Legal Representative Signatu | ıre | Date | | | |
| I or my representative | DID ☐ DID NOT accomp | oany the appraiser. (one | OF THESE BOXES MUS | T BE CHECKED) | | |
| c) Landowner or Owner's | Legal Representative Signatu | ıre | Date | | | |

This completed and signed document must be submitted with the Reimbursement Package to:

Grants Management Michigan Department of Natural Resources PO Box 30425 Lansing MI 48909-7925