



Farmland and Open Space Preservation Program

APPLICATION FOR LOCAL OPEN SPACE EASEMENT

(Part 361 of the Natural Resources and Environmental Protection Act, 1994 Act 451 as amended. Please read the Requirements and Instructions before filling out this form. Please print or type. Attach additional sheets as needed.)

OFFICIAL USE ONLY

Local Governing Body:

Date Received: _____

Application No.: _____

State on appeal:

Date Received: _____

Application No.: _____

Approved: _____ Rejected: _____

I. Personal Information:

1. Name(s) of Applicant: _____
(If more than two see #15)

Last	First	Initial
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1a. Marital Status: Married Single Divorced Widowed

2. Mailing Address: _____
Street City State Zip Code

3. Telephone Number: (Area Code) () _____

4. _____
Social Security Number Spouse's Social Security Number

5. Federal Employer Identification Number (if applicable): _____

II. Property Location: (Can be taken from the deed.)

6. County: _____ 7. Township, city or village: _____

8. Section No.: _____; Town No.: _____; Range No.: _____

III. Legal Information:

9. Attach a clear copy of the deed, land contract or memorandum of land contract. (See #14)

10. Attach a clear copy of the most recent property tax assessment notice or tax bill.

11. Is there a tax lien against the land described above? Yes No If "Yes," please explain circumstances: _____

12. Does the applicant own the mineral rights? Yes No

If owned by the applicant, are the mineral rights leased? Yes No

Indicate who owns or is leasing rights if other than the applicant: _____

Name the types of mineral(s) involved: _____

13. Is land cited in the application subject to a lease agreement (other than for mineral rights) permitting a use for something other than agricultural purposes: Yes No If yes, indicate to whom, for what purposes and the number of acres involved: _____

14. Is land being purchased under land contract? Yes No; If "Yes," indicate vendor (seller):

Name: _____

Mailing Address: _____

Street City State Zip Code

14a. Part 361 of the Natural Resources and Environmental Protection Act, 1994 Act 451 as amended, states that the vendor (seller) must agree to allow the land cited in the application to be enrolled in the program. Please have the land contract *seller* sign below. (All sellers must sign.)

Land Contract Seller:

I, the undersigned, understand and agree to permit the land cited in this application into the Farmland and Open Space Preservation Program.

(Date)

(Signature of Land Contract Vendor (Seller))

15) If the applicant is one of the following, please check the appropriate box and complete the following information (not applicable to an individual not meeting one of the categories - please leave blank):

- Corporation
- Limited Liability Company
- Partnership
- Estate
- Trust
- Association
- 2 or more persons having a joint or common interest in the land

If applicable, list the following: President, Vice President, Secretary, Treasurer, or trustees or members:

Name: _____ Title: _____ S.S. # _____

Mailing Address: _____
Street City State Zip Code

Name: _____ Title: _____ S.S. # _____

Mailing Address: _____
Street City State Zip Code

Name: _____ Title: _____ S.S. # _____

Mailing Address: _____
Street City State Zip Code

Name: _____ Title: _____ S.S. # _____

Mailing Address: _____
Street City State Zip Code

(Additional names may be attached on a separate sheet.)

IV. Land Eligibility Qualifications:

16) Do you feel that the preservation of your property in its present condition would (*check those categories which best apply to land cited in the application*):

- _____ Conserve Natural Resources
- _____ Enhance Recreational Opportunities
- _____ Idle Potential Farmland of more than 40 Acres
- _____ Conserve Scenic Resources
- _____ Preserve Historic Sites
- Promote the conservation of _____ soils, _____ wetlands, _____ beaches.

17) Total number of acres: _____

18) If land cited in the application meets the qualification of idle potential farmland, it must be designated by the Michigan Department of Agriculture as such.

Please indicate the date of designation: _____

19) Please indicate, in your own words, the reasons that the land cited in the application should be preserved:

20) Please draw a map (*sketch*) of the property, showing boundaries, structures and natural or man-made features such as lakes, roads, ponds, swamps, streams, or rivers, woodlots, roads, or gravel pits. (*Use space provided on page 4, or attach a separate sheet.*)

21. What is the number of years you wish the easement to run? (Minimum 10 years, maximum 90 years): _____

V. Signature:

22. The undersigned declare that this application, including any accompanying informational material, has been examined by them and to the best of their knowledge and belief is true and correct.

(Signature of Applicant)

(Corporation Name, if Applicable)

(Co-Owner)

(Signature of Corporate Officer)

(Date)

(Title)

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RESERVED FOR LOCAL GOVERNMENT USE, CLERK PLEASE COMPLETE ALL SPACES

Action by Local Governing Body: _____ Jurisdiction: _____
County, Township, City or Village

Date received by clerk: _____
application is _____ approved, _____ rejected.

(If rejected, see attached statement by Local Governing Body.)

Date of approval or rejection: _____ Clerk's signature and seal: _____

(If rejected written statement of reasons must be attached. Application must be returned to the applicant with any written comments from reviewing agencies.)

Property Appraisal: The current fair market value of the real property included in this application has been determined to be \$_____. The current fair market value of the real property exclusive of the open space development rights has been determined to be \$_____. The value of the open space development rights has been determined to be \$_____.

If approved, send a copy of the application and all written comments from reviewing agencies to:
MDA – FARMLAND AND OPEN SPACE PROGRAM; PO Box 30449, Lansing, MI 48909

(NOTE: Clerk – Please attach a list of all reviewing agencies with their mailing address and the name of the local assessor and his mailing address.)

Action by the State: On appeal from a local governing body rejection.

Date received: _____

Extension of time with applicant's consent: _____
(Date) (No. of Days)

This application is _____ approved, _____ rejected.

(If rejected, see attached statement by State.)

Date of approval or rejection: _____

Date forwarded to the Michigan Legislature: _____

Legislative Resolution Number and date of introduction: _____

Approved _____, Rejected _____ Date: _____

Map of Local Open Space Land Cited in Application Form:

- A. Show boundary of land cited in application.
- B. Show buildings as house, barn, etc., also sketch roads and other avenues of travel.
- C. Outline and designate the current uses of the property if possible.
- D. Show any significant natural features of the property.



County _____
Township _____
T. _____ R. _____ SEC. _____

