



**FARMLAND AND OPEN SPACE PRESERVATION PROGRAM**

**Application for Farmland Agreement**

Part 361 of the Natural Resources and Environmental Protection Act, 1994 Act 451 as amended, more commonly known as PA 116.

Please print or type. Attach additional sheets as needed. **Please read the Eligibility and Instructions document before filling out this form.**

| <u>OFFICIAL USE ONLY</u> |                      |
|--------------------------|----------------------|
| Local Governing Body:    | _____                |
| Date Received            | _____                |
| Application No:          | _____                |
| State:                   | _____                |
| Date Received            | _____                |
| Application No:          | _____                |
| Approved:                | _____ Rejected _____ |

**ALL APPLICATIONS MUST BE APPROVED BY LOCAL GOVERNING BODY ON OR BEFORE NOVEMBER 1 IN ORDER TO BE EFFECTIVE FOR THE CURRENT TAX YEAR**

**I. Personal Information:**

1. Name(s) of Applicant: \_\_\_\_\_  
Last
First
Initial

(If more than two see #15) \_\_\_\_\_  
Last
First
Initial

Marital status of all individual men listed on application, if more than one, indicate status after each name:  
 Married       Single

2. Mailing Address: \_\_\_\_\_  
Street
City
State
Zip Code

3. Telephone Number: (Area Code) (    ) \_\_\_\_\_

4. Alternative Telephone Number (cell, work, etc.): (Area Code) (    ) \_\_\_\_\_

5. E-mail address: \_\_\_\_\_

**II. Property Location (Can be taken from the Deed/Land Contract)**

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 tax assessment or tax bill with complete tax description of property.

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 purpose and the number of acres involved: \_\_\_\_\_

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

Name: \_\_\_\_\_

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 (sellers) must agree to allow the land cited in the application to be enrolled in the program. Please have the land contract sellers sign below. (All sellers must sign).

Land Contract Vendor(s): 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(s) (Seller)

15. If the applicant is one of the following, please check the appropriate box and complete the following information (if the applicant is not one of the following – please leave blank):

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

If applicable, list the following: Individual Names if more than 2 Persons; or President, Vice President, Secretary, Treasurer; or Trustee(s); or Members; or Partners; or Estate Representative(s):

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Name: \_\_\_\_\_ Title: \_\_\_\_\_

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

IV. Land Eligibility Qualifications: Check one and fill out correct section(s)

This application is for:

- a. 40 acres or more  complete only Section 16 (a thru g);
- b. 5 acres or more but less than 40 acres  complete only Sections 16 and 17; or
- c. a specialty farm  complete only Sections 16 and 18.

16. a. Type of agricultural enterprise (e.g. livestock, cash crops, fruit, etc):

\_\_\_\_\_

b. Total number of acres on this farm \_\_\_\_\_

c. Total number of acres being applied for (if different than above): \_\_\_\_\_

d. Acreage in cultivation: \_\_\_\_\_

e. Acreage in cleared, fenced, improved pasture, or harvested grassland: \_\_\_\_\_

f. All other acres (swamp, woods, etc.) \_\_\_\_\_

g. Indicate any structures on the property: (If more than one building, indicate the number of buildings):

No. of Buildings \_\_\_\_\_ Residence: \_\_\_\_\_ Barn: \_\_\_\_\_ Tool Shed: \_\_\_\_\_

Silo: \_\_\_\_\_ Grain Storage Facility: \_\_\_\_\_ Grain Drying Facility: \_\_\_\_\_

Poultry House: \_\_\_\_\_ Milking Parlor: \_\_\_\_\_ Milk House: \_\_\_\_\_

Other: (Indicate) \_\_\_\_\_

17. To qualify as agricultural land of 5 acres or more but less than 40 acres, the land must produce a minimum average gross annual income of \$200.00 per acre from the sale of agricultural products.

Please provide the average gross annual income per acre of cleared and tillable land during 2 of the last 3 years immediately preceding this application **from the sale of agricultural products (not from rental income):**

\$ \_\_\_\_\_ : \_\_\_\_\_ = \$ \_\_\_\_\_ (per acre)

total income total acres of tillable land

18. To qualify as a specialty farm, the land must be designated by MDARD, be 15 acres or more in size, and produce a gross annual income from an agricultural use of \$2,000.00 or more. If a specialty farm, indicate average gross annual income during 2 of the last 3 years immediately preceding application from the sale of agricultural products: \$ \_\_\_\_\_

Please note: specialty farm designation may require an on-the-farm site visit by an MDARD staff person.

19. What is the number of years you wish the agreement to run? (Minimum 10 years, maximum 90 years); \_\_\_\_\_

V. Signature(s):

20. 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)

\_\_\_\_\_  
(Corporate Name, If Applicable)

\_\_\_\_\_  
(Co-owner, If Applicable)

\_\_\_\_\_  
(Signature of Corporate Officer)

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Title)

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ON OR BEFORE NOVEMBER 1 IN ORDER TO BE EFFECTIVE FOR THE CURRENT TAX YEAR.**

**RESERVED FOR LOCAL GOVERNMENT USE: CLERK PLEASE COMPLETE SECTIONS I & II**

I. Date Application Received: \_\_\_\_\_ (Note: Local Governing Body has 45 days to take action)

Action by Local Governing Body: Jurisdiction: \_\_\_\_\_  
 County  Township  City  Village

This application is  approved,  rejected **Date of approval or rejection:** \_\_\_\_\_

(If rejected, please attach statement from Local Governing Body indicating reason(s) for rejection.)

Clerk's Signature: \_\_\_\_\_

Property Appraisal: \$\_\_\_\_\_ is the current fair market value of the real property in this application.

II. Please verify the following:

\_\_\_\_ Upon filing an application, clerk issues receipt to the landowner indicating date received.

\_\_\_\_ Clerk notifies reviewing agencies by forwarding a copy of the application and attachments

\_\_\_\_ If rejected, applicant is notified in writing within 10 days stating reason for rejection and the original application, attachments, etc. are returned to the applicant. Applicant then has 30 days to appeal to State Agency.

\_\_\_\_ If approved, applicant is notified and the original application, all supportive materials/attachments, and letters of review/comment from reviewing agencies (if provided) are sent to:

**MDARD-Farmland and Open Space Program, PO Box 30449, Lansing 48909**

**\*Please do not send multiple copies of applications and/or send additional attachments in separate mailings without first contacting the Farmland Preservation office.**

|   |  |
|---|--|
| <p>Please verify the following regarding Reviewing Agencies (sending a copy to reviewing agencies is required):</p> <p><b>COPY SENT TO:</b></p> <p>____ County or Regional Planning Commission</p> <p>____ Conservation District</p> <p>____ Township (if county has zoning authority)</p> <p>____ City (if land is within 3 miles of city boundary)</p> <p>____ Village (if land is within 1 mile of village boundary)</p> | <p><b>Before forwarding to State Agency, FINAL APPLICATION SHOULD INCLUDE:</b></p> <p>____ Copy of Deed or Land Contract (most recent showing <u>current ownership</u>)</p> <p>____ Copy of most recent Tax Bill (must include <u>tax description</u> of property)</p> <p>____ Map of Farm</p> <p>____ Copy of most recent appraisal record</p> <p>____ Copy of letters from review agencies (if available)</p> <p>____ Any other applicable documents</p> |
|---|--|

**Questions? Please call Farmland Preservation at (517) 284-5663**

**Map of Farm with Structures and Natural Features:**

- A. Show boundary of land cited in application. (Grid below is designed to represent a 5280 ft<sup>2</sup> (1 mile<sup>2</sup>) Section)
- B. Show all buildings (house(s), barn(s), etc.); also label roads and other avenues of travel (i.e. utility access, etc.).
- C. Outline and designate the current uses of the property (crops, pasture, forest, swamp, etc.).
- D. Clear copies of map(s) provided by USDA Farm Service Agency are acceptable, but please label any roads visible on map, structures and their use, etc.

**Note:** Any residential structures housing persons not directly associated with the farm operation must be excluded from the application. Please indicate if a building falls in this category and provide the appropriate property description for its exclusion. Unless the appropriate description is included, your application cannot be processed.

.....  
County \_\_\_\_\_

Township \_\_\_\_\_

T \_\_\_\_\_ R \_\_\_\_\_ Section \_\_\_\_\_

↑ North

