BUTLER TOWNSHIP
Branch County
993 Butler Rd
Quincy, MI 49082

Application for Real and/or Personal Property Tax Exemption

Instructions to Applicant:

1. Please review attached Butler Township Procedures for Granting and Removing Real Property Exemptions
2. Applications for exemption must be filed no later than the second Monday in March. All items on this application must be completed including any requested attachments.
3. The Assessor's office must be notified immediately upon the sale or lease of this or any other property belonging to your organization which is now exempt.
4. If you need additional space to respond to any of the questions below, please attach your response indicating which question(s) it pertains to.
5. **Return Information by Mail to:** Erica Ewers, Butler Township Assessor, 1048 Campbell Rd, Quincy, MI 49082 Questions call: 517-639-9074 or e-mail: ewersed@gmail.com

The undersigned organization requests exemption of the following real and/or personal property located in **BUTLER TOWNSHIP**, beginning with the assessment year _____.

Physical Address of Property: _____

_____

Parcel Number: **040** -_____ - _____ - _____ - _____

1. Name of organization claiming exemption of real and/or personal property:

   _____

2. Name of organization or individual owning the real and/or personal property:

   _____

3. Mailing Address: _____

   _____

4. Officers & Titles: _____

   _____

   _____

5. Contact Person: Name: _____

   Phone Number: _____

   E-mail: _____

   Mailing Address if different then above: _____

   _____

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6. Under what state statute are you claiming to be exempt from taxation:
   a. _____ Federal Property (MCL 211.7)
   b. _____ Housing Exemption for Elderly or Disabled Families (MCL 211.7d)
   c. _____ Solar, wind, or water energy tax exemption certificate (MCL 211.7h)
   d. _____ Existing Facility (MCL 211.7i)
   e. _____ New or Existing Facility for Commercial Housing Facilities Certificate (MCL 211.7j)
   f. _____ Industrial Facilities Exemption Certificate (MCL 211.7k)
   g. _____ State Property (MCL 211.7l)
   h. _____ Property owned by County, Township, City, Village, School District (MCL 211.7m)
   i. _____ Nonprofit Theatre, Library, Educational, or Scientific Institution (MCL 211.7n)
   j. _____ Nonprofit Charitable Institution (MCL 211.7o)
   k. _____ Memorial Homes or Posts (MCL 211.7p)
   l. _____ Boy or Girl Scout or Camp Fire Girls; 4-H Club or Foundation; Young Mens/Womens Christian Assoc. (MCL 211.7q)
   m. _____ Cetain Clinics (MCL 211.7r)
   n. _____ Houses of Public Worship; parsonage (MCL 211.7s)
   o. _____ Burial Grounds (MCL 211.7t)
   p. _____ Property of certain corporations and railroads (MCL 211.7v)
   q. _____ Property of agricultural society used primarily for fair purposes (MCL 211.7w)
   r. _____ Parks; Monument Ground or Armory (MCL 211.7x)
   s. _____ Landing area (MCL 211.7y)
   t. _____ Property used Primarily for Public School or other Educational Purposes (MCL 211.7z)
   u. _____ Real Property available to municipal water authority (MCL 211.7aa)
   v. _____ Nursery Stock Seasonal Protection Unit (MCL 211.7bb)
   w. _____ Real and Personal Property located in Renaissance Zone (MCL 211.7ff)
   x. _____ Property held by Land Bank Fast Track Authority (MCL 211.7gg)
   y. _____ Qualified Start-Up Business (MCL 211.7hh)
   z. _____ Property used by Innovations Center in Certified Technology Park (MCL 211.7ii)
   aa. _____ Federally-qualified Health Center (MCL 211.7jj)
   bb. _____ Eligible Nonprofit Housing Property (MCL 211.7kk)
   cc. _____ Charitable Nonprofit Housing Organization (MCL 211.7mm)
   dd. _____ Low Grade Iron Ore or Low Grade Iron Ore Mining Property (MCL 211.7oo)
   ee. _____ Mineral and Right, Claim, Lease, or Option (MCL 211.7pp)
   ff. _____ Mineral-Producing Property (MCL 211.7qq)
   gg. _____ Real & Personal Property owned by Eligible Economic Development Group (MCL 211.7tt)
   hh. _____ Aquaculture Production Facility or Hydroponics Production Facility (MCL 211.7ww)

7. Please list the reason(s) you are applying for this exemption: (Use additional sheets if needed)

   _____

   _____

   _____

8. What date was/will the property first be occupied by applicant? _____

9. What year did the organization acquire the property? _____

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10. List all sources of funding for your organization and the percentage each source contributes to the total (Use additional sheets as needed): _____

_____

_____

11. If you are seeking an exemption as a charitable, benevolent, educational, public health, or youth organization:
    a. List/describe the exact type of services you provide:_____

    _____

    b. List/describe the population or group(s) that you serve:_____

    _____

    c. Describe how the recipients of your services are selected: _____

    _____

    d. Do you charge a fee for your service? ___ yes or ___ no; if yes, please explain: _____

    _____

    _____

12. Are you currently receiving a property tax exemption in another Michigan City or Township? ___ yes or ___ no

    a. If yes, please provide name, address, and phone number of the City or Township where property is located. Please include Property Tax Identification Number and physical address.

    _____

    _____

    b. If yes, what type of exemption is being received? _____

13. Does any other individual or organization use the property? ___ yes or ___ no

    a. If yes, please list the name, address, and phone number of the individual or organization:

    _____

    b. Describe their use of the property: _____

    c. Was/is there a fee charged for use of the property? ___ yes or ___ no ; if yes, amount: $_____

    d. How many square feet of the building does the others use or occupy? _____

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e. How many square feet of the land does the others use or occupy? _____

ATTENTION: Please sign this application on the line provided and return to our office with the following documents of the organization:

1. Copy of Articles of Incorporation
2. Copy of By-Laws
3. Copy of Instrument by which property was acquired as Proof of Ownership such as: Warranty Deed, Quit Claim Deed, Land Contract, or Bill of Sale
4. Copy of any pamphlet, other information, or literature describing the functions of the organization
5. Copy of your policy as to who is eligible to receive your services and on what terms
6. Copy of IRS Statement indicating status such as Tax fillings including 990 forms.

I hereby state that the above information is true and complete.

_____ _____
Print Applicant/Representative's Name Applicant/Representative's Signature

_____ _____
Title Date

FOR OFFICE USE ONLY

_____ _____
RECEIVED BY DATE RECEIVED

_____ MEETS LEGAL REQUIREMENTS OF MICHIGAN LAW

EXEMPTION QUALIFIES UNDER SECTION: _____

REASON: _____

_____

_____

_____ DOES **NOT** MEET LEGAL REQUIREMENTS OF MICHIGAN LAW

REASON: _____

_____

_____

_____ _____
SIGNED BY: APPROVED / DENIED DATE SIGNED