Gun Plain Charter Township Assessor's Office 381 9th St. Plainwell, MI 49080

APPLICATION FOR EXEMPTION OF REAL AND/OR PERSONAL PROPERTY

The Michigan Constitution of 1963 (as amended) and the General Property Tax Act (PA 206 of 1893, as amended) set forth that all real and personal property located within the State of Michigan is subject to ad valorem property taxation, unless expressly exempt.

Real and personal property exemptions are identified and authorized within specific sections and subsection of MCL 211.7 and 211.9. Michigan Courts have set that the burden of proof of exemption entitlements rests with the applicant. The applicant's 501(c)(3) status is not a determining factor for exemption.

In order for the exemption of ad valorem property to be approved and added to the assessment roll, the following procedures will be followed:

- 1. A completed tax exemption application must be filed with the Gun Plain Township Assessing Office (on or before December 31)
- 2. All attachments/documents must be submitted with the application.
- 3. A field inspection of the property will be completed.
- 4. If necessary, the Gun Plain Township attorney, will be asked to review and give an opinion
- 5. The official notice of the taxable status will be the assessment change notice

Instructions to the Applicant:

- 1. To be eligible for exemption, the property must have been owned and occupied by the applicant on December 31 of the year preceding the assessment for which exemption is sought.
- 2. Application for exemption must be filed no later than the second Monday in March. All pages of the application must be completed.
- 3. Please notify the Assessor's office immediately of the sale or lease of this or any other property belonging to your organization that is now exempt.
- 4. If you need additional space to respond to any of these questions, please attach your response indicating which questions you are answering.

Assessor:

| The undersigned organization requests exemption of the following real and/or personal properties located in the Township of Gun Plain, beginning with the assessment year of | | | | | |
|--|--|--|--|--|--|
| Address: | | | | | |
| Permanent Parcel Number: 03-03 | | | | | |
| 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. | Please indicate under what statute you are claiming to be exempt from taxation. | | |
|-----|--|--|--|
| 4. | Please describe all uses made of the property last year. | | |
| 5. | Please state when the property was first used. | | |
| 6. | When first occupied, what was the nature of the use? Did the use change significantly at any time? | | |
| 7. | Please list any other property you now own or occupy. Does any other individual or organization use the property? | | |
| 8. | What is the date that the organization claiming the exemption acquired the property? | | |
| 9. | Please furnish the name, address, and telephone number of a representative of the organization who can be contacted for additional information. | | |
| 10. | .0. Please list names, addresses, and telephone numbers of all current officers and members of Board of Directors. | | |
| | a. How many officers, directors, and employees does the organization employ that receive salaries? | | |
| | Please indicate all sources of funding for your organization and the percentage each source contributes to the total. | | |
| 11. | If you are seeking an exemption as a charitable, benevolent, educational, public health, or youth organization a. Please describe the exact type of services you provide. | | |

| b. | b. Please describe the population/group that you serve. | | |
|--|--|------------------------------|--|
| c. | c. Please describe how the recipients of your services are selected. | | |
| 12. Please attach a copy of your policy as to who is eligible to receive your services and on what terms and conditions. | | | |
| IMPORTANT: | T: Please sign this application on the line provided and return it to o : | ur office with the following | |
| | by of Articles of Incorporation by of By-Laws | | |
| 3. Copy | by of instrument by which property was acquired. | | |
| | that the Township reserves the right to request up to the previous the ding 990 forms. | iree years of Income Tax | |
| I hereby swea | ear or affirm that the above information is true and complete. | | |
| Applicant Nan | ame | | |
| Applicant Sign | ignature — Title | | |
| Office Use On | Only | | |
| | Meets Legal Requirements | | |
| Exemption qu | qualifies under MCL | | |

| Does not Meet Legal Requirements | | | |
|----------------------------------|------|--|--|
| Reason: | | | |
| | | | |
| | | | |
| Ву | Date | | |