



ROSE TOWNSHIP
9080 MASON STREET
HOLLY, MI 48442
(248) 634-7551

Date Received: _____

APPLICATION FOR EXEMPTION OF PERSONAL PROPERTY

BEGINNING WITH ASSESSMENT YEAR: _____ Year to be filled in by the Assessor

TO APPLICANT: Present this Application accompanied by the following documents to the Assessor's Office:

1. Articles of Incorporation and By-Laws
2. Balance Sheet
3. Copy of Federal Income Tax Return for last 3 years (including 990 Forms)
4. Statement of Taxable Status from the Internal Revenue Service
5. Factual statement explaining what your organization has done within the past year that qualifies this entity to receive an exemption.

TO THE ASSESSOR (APPLICANT PLEASE COMPLETE SIDE ONE):

We, the undersigned, respectfully request the exemption of the following described personal property, located in the City/Village/Township of _____, same being owned by the undersigned, and being used for:

☐ Educational [MCL 211.9(a)] ☐ Religious [MCL 211.7s] ☐ Charitable [MCL 211.9(a)] ☐ Renaissance Zone [MCL 211.7ff]
☐ Scientific [MCL 211.9(a)] ☐ Other _____ under Section _____ of the Michigan Property Tax Laws

Organization Name: _____

Officers: _____ Title: _____

Local Property Street Address: _____

Mailing Address (if different): _____

Parcel Tax Identification Number:

Do you currently have any leased equipment at this location? Yes ☐ No ☐
If yes, please attach a rider giving the names of the entities.

Are there any other companies, affiliated corporations or individuals doing business at this location? Yes ☐ No ☐
If yes, please attach a rider giving the names and contact information for each entity.

Are you currently receiving a personal property tax exemption in another Michigan Community? Yes ☐ No ☐

If yes, where? _____

For what? _____

The above is, to the best of my knowledge and judgement, a true and correct statement of the facts concerning the above described property.

Signed: _____ Phone: _____

Print Name: _____ Email: _____

Title: _____

Address: _____

Subscribed and sworn to before me this _____ day of _____, 20 _____

Notary Public

My Commission Expires: _____

APPLICATION FOR EXEMPTION OF PERSONAL PROPERTY – ASSESSOR (PAGE 2)

PARCEL TAX IDENTIFICATION NUMBER: _____

Recommendation:

EXEMPTION APPROVED: _____ Date: _____
Assessor

Applicant: Return this form (with only Page 1 completed) to:
Rose Township Assessor, 9080 Mason Street, Holly MI 48442

08/20/26