SUPERIOR TOWNSHIP
Property Tax Exemption Request

PROPERTY INFORMATION

☐ Real Property Parcel #: _____
☐ Personal Property Parcel #: _____
Property Address: _____

OWNER INFORMATION
Name of organization_____
Contact person: _____Phone #: _____
Mailing Address:_____

INDICATE UNDER WHAT STATE STATUTE YOU ARE CLAIMING EXEMPTION:

_____ 211.7d
_____ 211.7p
_____ Other (please specify) _____
_____ 211.7g
_____ 211.7r
_____ 211.7n
_____ 211.7s
_____ 211.7o

MICHIGAN TAX TRIBUNAL FOUR-PART TEST: (Check all that apply)
_____ The real estate or personal property must be owned, occupied and used by the exemption claimant. **Note: Tax day is December 31st each year.**
_____ The exemption claimant must be a library, charitable, educational, scientific or religious institution.
_____The claimant must be incorporated under the laws of the State of Michigan or any other state in the United States.
_____The exemption exists only when the buildings and other property thereon are occupied by the claimant solely for the purpose for which it is incorporated.

ATTACH COPIES OF THE FOLLOWING TO THIS FORM:

1. Articles of Incorporation
2. Organization's By-laws
3. Copy of deed or land contract showing ownership
4. Internal Revenue Service Code 501c (3) status
5. Internal Revenue Service Code 990, 990n, 990ez
6. Copy of any pamphlet, other information, or literature describing the functions of the organization
7. Copy of fee schedule
8. Copy of your policy as to who is eligible to receive your services and on what terms

If you are not providing any of the above, you must include a letter explaining why.

_____ Signature/Title

_____ Phone #

_____ Date