City of Troy, Oakland County Michigan
APPLICATION FOR THE EXEMPTION OF PERSONAL PROPERTY

Beginning with Assessment Year _____

TO THE APPLICANT: ***Present this completed Application along with all documentation listed at the top of the second page***.

TO THE ASSESSOR:

We, the undersigned, respectfully request the exemption of the following property, located in the City of Troy, same being owned by the undersigned, and being used for Religious_____, Charitable _____, Scientific _____, Educational _____, Memorial Home _____, or _____purposes.

Name_____
Address # _____ Street Name _____ Suite _____

THE FOLLOWING QUESTIONS MUST BE ANSWERED**:**

In whose name is the Personal Property owned?

_____

Is this organization incorporated as a Non-Profit?

_____

How is the property being utilized at the present time?

_____

Is the use of the facility strictly for members, or are other users allowed usage?

_____

If non-members are allowed usage, do you charge for this use? _____
How much is charged? _____

Do you intend to abandon or sell the referenced property at any time? _____
Is so, when? _____

*You must notify the Assessing Department of the sale of this, or any other exempt property of your corporation located within the City of Troy.

Please submit the following documents with your application:

Balance Sheet
Operating Statement
Source and Application of Funds
Sources of Financial Support in Order to Magnitude
Salaries of Officers
Federal and State Exemption Certificate

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

Signed ______________________________________ Title __________________

Address_____________________________________

____

Email: _____________________________________

Phone Number: _____________________________

Subscribed and sworn to before me this _____day of ______________, 20___

My commission expires ________________________

____

Notary Public, ________________ County

*After completing the application, print the application. Then have an authorized representative signature notarized. Then submit the application with all supporting documentation to the Assessing Department, City of Troy, 500 W. Big Beaver, Troy, MI. 48084

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Recommendation: ____

______________________________________ ____________________

Assessor Date