

Minde B. Lux, County Clerk
Shelly Nelson, Chief Deputy
Carol Anderson, Deputy Clerk
Kim Fussman, Deputy Clerk
Leann Ellis, Deputy Clerk
Amber Smith, Court Clerk

Ext. 205
Ext. 260
Ext. 262
Ext. 259
Ext. 259
Ext. 346



200 North Main Street
Mt. Pleasant, MI 48858
Phone (989) 772-0911
Fax (989) 772-6347
www.isabellacounty.org
clerk@isabellacounty.org

May 24th, 2024

RECEIVED

Isabella County Planning Commission
510 West Pickard
Mt Pleasant, MI 48858

MAY 24 2024

INSPECTION DEPT.

RE: **Laura L. House Farmland Agreement**

Attached please find copies of the **LAURA L. HOUSE FARMLAND AGREEMENT APPLICATION**. Please present these applications to the Planning Commission Board for review. The Board has 30 days to review and comment on the application and provide feedback. After 30 days the application will be presented to the Isabella County Board of Commissioners for their approval/rejection.

If you have any further questions, please do not hesitate to contact me at 317-4070, ext. 1205.

Sincerely,

Minde B. Lux
Isabella County Clerk



FARMLAND AND OPEN SPACE PRESERVATION PROGRAM

Application for Farmland Development Rights Agreement

Part 361 of the Natural Resources and Environmental Protection Act, 1994 Act 451 as amended, more commonly known as PA 116. Please print or type. Attach additional sheets as needed. Refer to the Eligibility and Instructions document before filling out this form.

OFFICIAL USE ONLY	
Local Governing Body:	MLB 5/24/24 County Chair
Date Received	5/11/24
Application No:	
State:	
Date Received	
Application No:	
Approved:	Rejected

**ALL APPLICATIONS MUST BE APPROVED BY LOCAL GOVERNING BODY
ON OR BEFORE NOVEMBER 1 TO BE EFFECTIVE FOR THE CURRENT TAX YEAR**

I. Personal Information:

1. Name(s) of Applicant: House Last Laura First L. Initial

(If more than two see #15)

2. Mailing Address: 103 E. Stevenson Lk. Rd, Farwell Street MI City State 48622 Zip Code

3. Phone Number: (Area Code) ()

4. Alternative Telephone Number (cell, work, etc.): (Area Code) (989) 915-2471

5. E-mail address: laurahouse42@gmail.com

II. Property Location (Can be taken from the Deed/Land Contract)

6. County: Isabella 7. Township, City or Village: Denver

8. Section No. 8 Town No. T 15 N Range No. R 3 W

Parcel # (Tax ID): 06-008-40-005-06

III. Legal Information:

9. Attach a clear copy of the deed, land contract or memorandum of land contract. (See #14)

10. Attach a clear copy of the most recent tax assessment or tax bill with complete tax description of property.

11. Is there a tax lien against the land described above? Yes No
If "Yes", please explain circumstances: _____

12. Does the applicant own the mineral rights? Yes No

If owned by the applicant, are the mineral rights leased? Yes No

Indicate who owns or is leasing rights if other than the applicant: _____

Name the types of mineral(s) involved: _____

13. Is land cited in the application subject to a lease agreement (other than for mineral rights) permitting a use for something other than agricultural purposes: Yes No If "Yes", indicate to whom, for what purpose and the number of acres involved: _____

14. Is land being purchased under land contract Yes No: If "Yes", indicate vendor(s):

Name: _____

Address: _____

Street _____ City _____ State _____ Zip Code _____

14a. Part 361 of the Natural Resources and Environmental Protection Act, 1994 Act 451 as amended, states that the vendor (sellers) must agree to allow the land cited in the application to be enrolled in the program. Please have the land contract sellers sign below. (All sellers must sign).

Land Contract Vendor(s): I, the undersigned, understand and agree to permit the land cited in this application into the Farmland and Open Space Preservation Program.

Date _____

Signature of Land Contract Vendor(s) (Seller) _____

15. If the applicant is one of the following, please check the appropriate box and complete the following information (if the applicant is not one of the following – please leave blank):

2 or more persons having a joint or common interest in the land
 Corporation Limited Liability Company
 Estate Trust Partnership
 Association

If applicable, list the following: Individual Names if more than 2 Persons; or President, Vice President, Secretary, Treasurer; or Trustee(s); or Members; or Partners; or Estate Representative(s):

Name: _____ Title: _____

Name: _____ Title: _____

Name: _____ Title: _____

Name: _____ Title: _____

(Additional names may be attached on a separate sheet.)

IV. Land Eligibility Qualifications: Check one and fill out correct section(s)

This application is for:

a. 40 acres or more → complete only Section 16 (a thru g);
 b. 5 acres or more but less than 40 acres → complete only Sections 16 and 17; or
 c. a specialty farm → complete only Sections 16 and 18.

16. a. Type of agricultural enterprise (e.g. livestock, cash crops, fruit, etc):

CASH CROPS

b. Total number of acres on this farm: 18.41

c. Total number of acres being applied for (if different than above): _____

d. Acreage in cultivation: 18, 41

e. Acreage in cleared, fenced, improved pasture, or harvested grassland:

f. All other acres (swamp, woods, etc.)

g. Indicate any structures on the property: (If more than one building, indicate the number of buildings):

No. of Buildings Residence: Barn: Tool Shed:

Silo: _____ Grain Storage Facility: _____ Grain Drying Facility: _____

Poultry House: **✓** Milking Parlor: **✓** Milk House: **✓**

Other: (Indicate) _____

17. To qualify as agricultural land of 5 acres or more but less than 40 acres, the land must produce a minimum average gross annual income of \$200.00 per acre from the sale of agricultural products.

Please provide the average gross annual income per acre of cleared and tillable land during 2 of the last 3 years immediately preceding this application **from the sale of agricultural products** (not from rental income):

\$ 15,000 / 18.41 = \$ 815.00 (per acre)
total income total acres of tillable land

18. To qualify as a specialty farm, the land must be designated by MDARD, be 15 acres or more in size, and produce a gross annual income from an agricultural use of \$2,000.00 or more. If a specialty farm, indicate average gross annual income during 2 of the last 3 years immediately preceding application from the sale of agricultural products: \$

Please note: specialty farm designation may require an on-the-farm site visit by an MDARD staff person.

19. What is the number of years you wish the agreement to run? (Minimum 10 years, maximum 90 years); 20 years

V. Signature(s):

20. The undersigned declare that this application, including any accompanying informational material, has been examined by them and to the best of their knowledge and belief is true and correct.

Laura Horne
 (Signature of Applicant)

 (Corporate Name, If Applicable)

 (Co-owner, If Applicable)

 (Signature of Corporate Officer)

5-2-24
 (Date)

 (Title)

**ALL APPLICATIONS MUST BE APPROVED BY LOCAL GOVERNING BODY
 ON OR BEFORE NOVEMBER 1 IN ORDER TO BE EFFECTIVE FOR THE CURRENT TAX YEAR.**

RESERVED FOR LOCAL GOVERNMENT USE: CLERK PLEASE COMPLETE SECTIONS I & II

I. Date Application Received: _____ (Note: Local Governing Body has 45 days to take action)

Action by Local Governing Body: Jurisdiction: _____
 County Township City VillageThis application is approved, rejected Date of approval or rejection: _____

(If rejected, please attach statement from Local Governing Body indicating reason(s) for rejection.)

Clerk's Signature: _____

Property Appraisal: \$ _____ is the current fair market value of the real property in this application.

Parcel Number (Tax ID): _____

II. Please verify the following:

WBL Upon filing an application, clerk issues receipt to the landowner indicating date received.

WBL Clerk notifies reviewing agencies by forwarding a copy of the application and attachments

_____ If rejected, applicant is notified in writing within 10 days stating reason for rejection and the original application, attachments, etc. are returned to the applicant. Applicant then has 30 days to appeal to State Agency.

_____ If approved, applicant is notified and the original application, all supportive materials/attachments, and letters of review/comment from reviewing agencies (if provided) are sent to:

MDARD-Farmland and Open Space Preservation Program, P.O. Box 30449, Lansing, MI 48909

*Please do not send multiple copies of applications and/or send additional attachments in separate mailings without first contacting the Farmland Preservation office.

<p>Please verify the following regarding Reviewing Agencies (Sending a copy to reviewing agencies is required):</p> <p>COPY SENT TO:</p> <p><input checked="" type="checkbox"/> County or Regional Planning Commission <input checked="" type="checkbox"/> Conservation District <input checked="" type="checkbox"/> Township (if county has zoning authority) <u>Denver</u></p>	<p>Before forwarding to State Agency, FINAL APPLICATION SHOULD INCLUDE:</p> <p><input type="checkbox"/> Copy of Deed or Land Contract (most recent showing <u>current ownership</u>) <input type="checkbox"/> Copy of most recent Tax Bill (must include <u>tax description</u> of property) <input type="checkbox"/> Map of Farm <input type="checkbox"/> Copy of most recent appraisal record <input type="checkbox"/> Copy of letters from review agencies (if available) <input type="checkbox"/> Any other applicable documents</p>
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DENVER TWP TREASURER		TAX DESCRIPTION	MILLAGE	AMOUNT
Treasurer's PH:	989-433-5891	CO-I-RIDE TRANS	0.86200	22.36
ISABELLA COUNTY, Michigan		CO-MED CARE FAC	1.00000	25.94
Parcel #:	06-008-40-005-06	CO-COM ON AGING	1.00000	25.94
Property Assessed To:		CO-PARKS & REC	0.35000	9.08
ODONNELL KATHERINE M		06 TWP OPER	0.98890	25.65
C/O HOUSE LAURA		MT PL SCH OPER	18.00000	EXEMPT
103 E STEVENSON LAKE RD		MT PL DEBT 16-1	1.76000	45.66
FARWELL, MI 48622		MT PL DEBT 16-2	0.70000	18.16
Property Address:		MT PL DEBT 22	1.52000	39.43
E ROSEBUSH RD 7000 MI		GR/IS RESD OPER	0.26400	6.84
MOUNT PLEASANT MI 48858		GR/IS RESD SP ED	4.20000	108.96
		GR/IS RESD V ED	1.00000	25.94
		MID MICH COM COL	1.21830	31.60
		CHIP LIBRARY	1.75000	45.40
		D489 MCKAY DR		36.29
Acreage:	18.41			
Property Class:	102	AGRICULTURAL-VACANT		
School District:	37010	MT PLEASANT CITY SCHOOL		
Qualified Ag Exemption Has Reduced This Bill By: \$467.01				
1 mill equals \$1.00 per \$1000 of Taxable Value.				
TAX BASE VALUES				
Taxable Value:	25,945	Description of Lands or Personal Property: lengthy descriptions subject to space limitations		
State Equalized Value:	38,900	W 1/2 OF SE 1/4 OF SE 1/4 SEC 8 T15N R3W EXC THE S 267.5 FT OF THE W 260 FT 18.41 A M/L . COMBINATION/SPLIT FOR 2011 FROM 40-005-03 & 40-005-04 THEN SPLIT TO 40-005-05 & 40-005-06 . LIFE ESTATE RETAINED FOR JAMES O'DONNELL PER QC L1668 P0154 . AG EXEMPT TRANSFER FOR AFFID L1665 P723 REGISTERED 04-28-14 FOR SALE QC L1665 P718 DATED 04-18-14 WITH 2015 CAPPED TV = 26700 & AV = 26700 . AMENDED (L1665 P723) AG EXEMPT TRANSFER FOR AFFID L1672 P810 REGISTERED 07-21-14 FOR SALE QC L1665 P718 DATED 04-18-14 WITH 2015 CAPPED TV = 21883 & AV = 26700 . AG EXEMPT TRANSFER FOR AFFID L1668 P159 REGISTERED 05-29-14 FOR SALE QC L1668 P159 DATED 05-29-14 WITH 2015 CAPPED TV = 21883 & AV = 26700 . LIFE ESTATE RELEASED		
Assessed Value:	38,900			
Qualified Ag Exemption:	25,945			
% Declared Exempt:	100.0000			
OPERATING FISCAL YEARS				
County:	10-01-2023 - 09-30-2024	TAXES WILL BE COLLECTED AT THE DENVER TOWNSHIP HALL AT 7016 E BEAL CITY RD, MOUNT PLEASANT, MI ON THURSDAY, DEC 28, 2023 AND THURSDAY, FEB 29, 2024 FROM 9 AM TO 5 PM. PAYMENT IS BY MAIL ONLY TO THE DENVER TOWNSHIP TREASURER'S ADDRESS ABOVE (TOP LEFT CORNER) AND PLEASE INCLUDE A PHONE NUMBER ON YOUR CHECK. ** PLEASE SEND A S.A.S.E FOR YOUR RECEIPT, OR PROVIDE AN E-MAIL ADDRESS.**		
Twn/Cty/Village:	04-01-2023 - 03-31-2024	TREASURER'S E-MAIL: TREASURER@DENVERICMI.GOV		
School:	07-01-2023 - 06-30-2024			
State:	10-01-2023 - 09-30-2024			
Does NOT affect when the tax is due or its amount				
FOR ASSESSOR QUESTIONS PLEASE CONTACT: EQUITY ASSESSMENTS INC. DENISE HALL - ASSESSOR 5887 SCHAFIN DR. WEIDMAN MI 48893 PH: 989-644-3413 OR E-MAIL AT: DENISE_EQUIITYA@YAHOO.COM		DUE AND PAYABLE 12/01/2023 THROUGH 2/29/2024 WITHOUT PENALTY AS OF MARCH 1, 2024 PAYABLE TO ISABELLA COUNTY TREASURER WITH A 4% ADMIN FEE AND 1% INTEREST PER MONTH UNTIL PAID. CONTACT ISABELLA COUNTY TREASURER FOR DELINQUENT PAYOFF AMOUNTS. POSTMARKS ARE NOT ACCEPTED BY THE TOWNSHIP OR COUNTY TREASURER. -- DOG LICENSES MAY ALSO BE PURCHASED AT THIS TIME. --		

Additional information about PRE's, ESCROW ACCOUNTS, TAX DEFERMENT and more on reverse side



Document # 20230032645 QUIT C DEED
Isabella County, Michigan
Karen Jackson, Register of Deeds
Recorded: 03/16/2023 12:46 PM
OR LIBER 1899 PAGE 5454

QUIT CLAIM DEED

Katherine M. O'Donnell, by Laura House, Conservator, Letters of Conservatorship for which are being recorded simultaneously with this instrument, pursuant to Clare County Probate Court Order dated January 18, 2023, which is being recorded simultaneously with this instrument, of 2532 W. Cadillac Drive, Farwell, Michigan 48622, conveys to Katherine M. O'Donnell, of 2532 W. Cadillac Drive, Farwell, Michigan 48622, for her lifetime, the property described below, coupled with an unrestricted power to convey the property during her lifetime. This power to convey includes the power to sell, gift, encumber, lease, convey back to herself or otherwise dispose of the property in fee simple and keep the proceeds from any conveyance, without joinder by the remaindermen. If Katherine M. O'Donnell has not previously conveyed the property prior to her death, the property is conveyed to Laura House, of 103 E. Stevenson Lake Road, Farwell, Michigan 48622. The property is located in Denver Township, Isabella County, Michigan and is described on attached Exhibit A.

The consideration is less than One Hundred Dollars. This transfer is exempt from tax under MCL 207.526(a) and MCL 207.505(a).

Grantor grants to grantees the right to make all remaining divisions permitted under the Michigan Land Division Act of MCL 560.108 and MCL 560.109.

This property may be located within the vicinity of farmland or a farm operation. Generally accepted agricultural and management practices which may generate noise, dust, odors, and other associated conditions may be used and are protected by the Michigan Right to Farm Act.

Dated: January 31, 2023

Katherine M. O'Donnell, by Laura House, Conservator
Katherine M. O'Donnell, by Laura House, Conservator

Acknowledged before me in Ingham County, Michigan, on January 31, 2023, by Laura House, Conservator for Katherine M. O'Donnell.

Josie Alberta
Josie Alberta, Notary Public
Ionia County, Michigan
My commission expires: 06/10/2026
Acting in Ingham County, Michigan

Drafted without title examination by &
when recorded return to:
Rosemary H. Buhl
Buhl, Little, Lynwood & Harris, PLC
271 Woodland Pass, Suite 115
East Lansing, MI 48823
(517) 853-6900

Send Subsequent Tax Bills To:
Katherine M. O'Donnell
c/o Laura House, Conservator
103 E. Stevenson Lake Road
Farwell, MI 48622

Tax Parcel #06-008-10-001-00, 06-008-30-004-13,
06-008-30-004-05, 06-008-30-004-06, 06-008-30-004-10
06-008-30-004-11, 06-008-40-005-06, & 06-018-10-003-00

Recording Fee: \$30

Transfer Tax: \$0.00

EXHIBIT A

Parcel 1:
The Northeast 1/4 of the Northwest 1/4 of Section 8, T15N, R3W, Denver Township, Isabella County, Michigan.

Parcel 2:
Part of the West 1/2 of the Southwest 1/4 of Section 8, T15N, R3W, Denver Township, Isabella County, Michigan, described as beginning 1635.46 feet North of the Southwest corner of said Section, thence North 329 feet, thence East 1324.92 feet, thence South 329 feet, thence West 1324.92 feet to the point of beginning.

Parcel 3:
Part of the West 1/2 of the Southwest 1/4 of Section 8, T15N, R3W, Denver Township, Isabella County, Michigan, described as Beginning at the Southwest corner of said Section 8; thence North 00°16'56" West, along the West line of said Section 8, 1636.46 feet; thence North 90°00'00" East, parallel with the South line of said Section 8, 1324.92 feet to a point on the West, North-South 1/8 line of said Section 8; thence South 00°19'23" East, along said West, North-South 1/8 line, 1236.72 feet; thence South 90°00'00" West, parallel with said South Section line, 1059.16 feet; thence South 02°02'20" West, 400.00 feet to a point on said South Section line; thence North 90°00'00" West, along said South section line, 250.45 feet; to the Point of Beginning.

Parcel 4:
Part of the Southwest 1/4 of the Southwest 1/4 Section 8, T15N, R3W, Denver Township, Isabella County, Michigan described as beginning 250.45 feet East of the Southwest corner of said Section 8, T15N, R3W, thence North 400 feet; thence East 195 feet; thence South 400 feet; thence West 195 feet to the Point of Beginning.

Parcel 5:
Part of the West 1/2 of the Southwest 1/4 of Section 8, T15N, R3W, Denver Township, Isabella County, Michigan, more particularly described as beginning at a point on the South line of said Section 8 which is North 90°00'00" East, along said South section line, 935.79 feet from the Southwest corner of said Section 8; thence continuing North 90°00'00" East, along said South Section line, 195.14 feet; thence North 00°13'59" West, 399.75 feet; thence South 90°00'00" West, parallel with said South section line, 194.52 feet; thence South 00°08'34" East, 399.75 feet to the Point of Beginning.

Parcel 6:
Part of the Southwest 1/4 of the Southwest 1/4 of Section 8, T15N, R3W, Denver Township, Isabella County, Michigan, described as beginning on the South Section line, 1130.93 feet East of the Southwest corner of said Section 8, thence East along the South Section line, 195.15 feet to the West, North-South 1/8 line, thence N 00° 19' 23" W, along said West, North-South 1/8 line, 399.75 feet, thence West parallel with the South Section line, 194.52 feet, thence S 00° 13' 59" E, 399.75 feet to the point of beginning.

Parcel 7:
The West 1/2 of the Southeast 1/4 of the Southeast 1/4 of Section 8, T15N, R3W, Denver Township, Isabella County, Michigan, EXCEPT a parcel of land being part of the West 1/2 of the Southeast 1/4 of the Southeast 1/4 of Section 8, T15N, R3W, Denver Township, Isabella County, Michigan, beginning at the Southwest corner of the West 1/2 of the Southeast 1/4 of the Southeast 1/4 of Section 8, thence North along the East 1/8th line 267.5 feet, thence East 260+ feet to a point 400.00 feet West of the East line of the West 1/2 of the Southeast 1/4 of the Southeast 1/4, thence South 267.5 feet to the point on the South line of Section 8 that is 400.00 feet West of the Southeast corner of the West 1/2 of the Southeast 1/4 of the Southeast 1/4, thence West along the South Section line, 260+ feet to the Point of Beginning.

Parcel 8:
The South 1/2 of the Northwest 1/4 of Section 18, T15N, R3W, Denver Township, Isabella County, Michigan.

Subject to all easements and restrictions of record.

LF
CF 011



STATE OF MICHIGAN
DEPARTMENT OF HEALTH AND HUMAN SERVICES
CERTIFICATE OF DEATH

STATE FILE NUMBER
000638

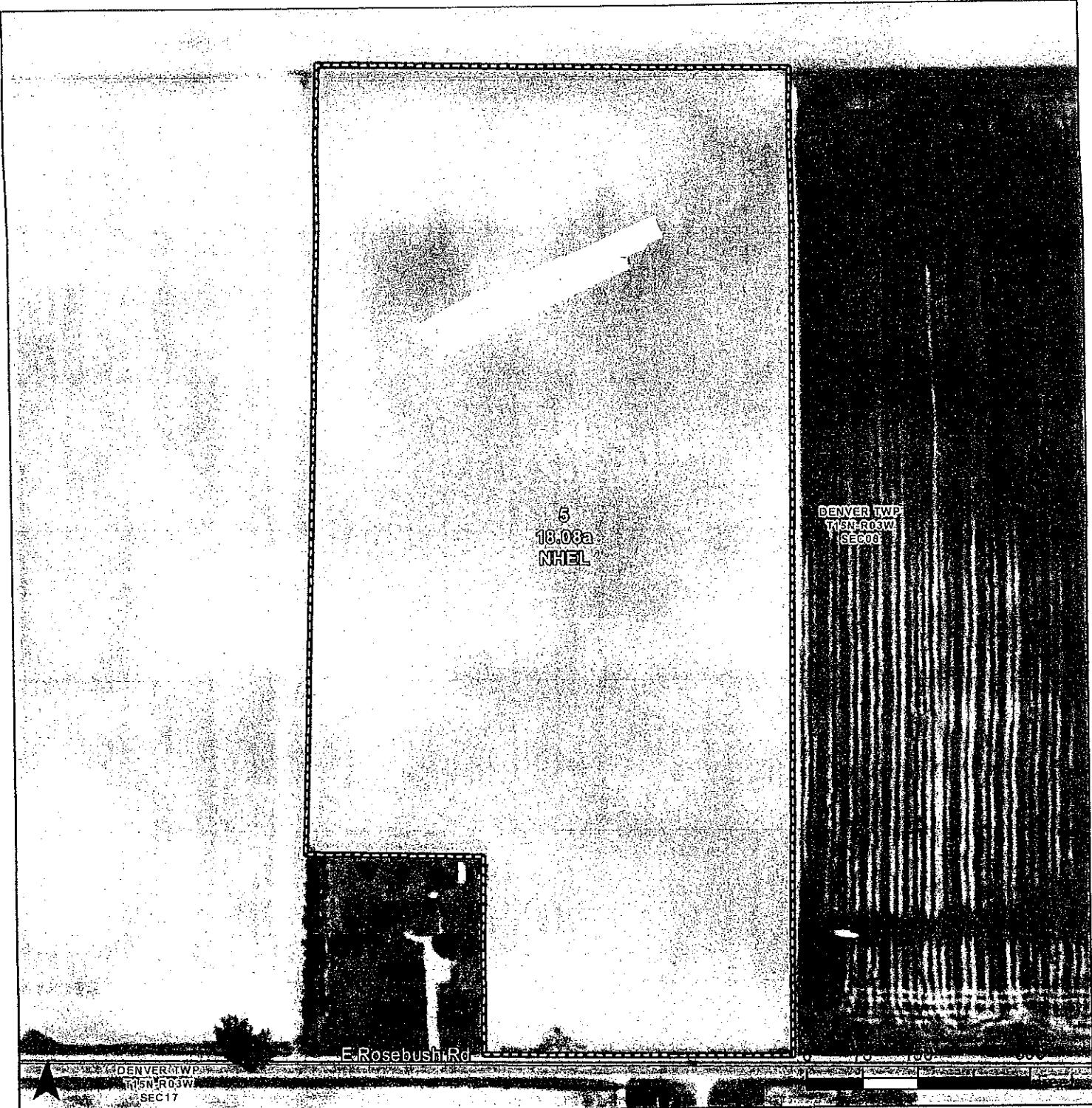
1. DECEDENT'S NAME (First, Middle, Last) Katherine M. O'Donnell		2. DATE OF BIRTH February 21, 1932	3. SEX Female	4. DATE OF DEATH January 04, 2024
5. NAME AT BIRTH OR OTHER NAME USED FOR PERSONAL BUSINESS Katherine M. Holp		6a. AGE- Last Birthday (Years) 91	6b. UNDER 1 YEAR MONTHS 0	6c. UNDER 1 DAY DAYS 0
7a. LOCATION OF DEATH North Woods Nursing Center		7b. CITY, VILLAGE OR TOWNSHIP OF DEATH Farwell		7c. COUNTY OF DEATH Clare
8a. CURRENT RESIDENCE - STATE Michigan		8b. COUNTY Isabella	8c. LOCALITY Vernon Twp	8d. STREET AND NUMBER 103 East Stevenson Lake Road
8e. ZIP CODE 48622		9. BIRTH PLACE Mount Pleasant, Michigan	10. SOCIAL SECURITY NUMBER 365-32-0962	11. DECEDENT'S EDUCATION High school graduate
12. RACE White		13a. ANCESTRY German, Scottish	13b. HISPANIC ORIGIN No	14. EVER IN THE U.S. ARMED FORCES? No
15. USUAL OCCUPATION Clerical		16. KIND OF BUSINESS OR INDUSTRY County Government	17. MARITAL STATUS Widowed	18. NAME OF SURVIVING SPOUSE (If wife, give name before first married)
19. FATHER'S NAME (First, Middle, Last) Adam Holp		20. MOTHER'S NAME BEFORE FIRST MARRIED (First, Middle, Last) Eva Bender		
21a. INFORMANT'S NAME Laura House		21b. RELATIONSHIP TO DECEDENT Daughter	21c. MAILING ADDRESS 103 E. Stevenson Lake Rd., Farwell, Michigan 48622	
22. METHOD OF DISPOSITION Burial		23a. PLACE OF DISPOSITION Denver Township Cemetery	23b. LOCATION • City or Village, State Denver Twp, Michigan	
24. SIGNATURE OF MORTUARY SCIENCE LICENSEE Sarah J. Graham		25. LICENSE NUMBER 4501007077	26. NAME AND ADDRESS OF FUNERAL FACILITY Clark Family Funeral Chapel, 114 S. Bradley Street, Mount Pleasant, Michigan 48858	
27a. CERTIFIER <input checked="" type="checkbox"/> Certifying Physician - To the best of my knowledge, death occurred due to the cause(s) and manner stated. <input checked="" type="checkbox"/> Medical Examiner - On the basis of examination, and/or investigation, in my opinion, death occurred at the time, date, and place, and due to the cause(s) and manner stated. Andrew Colman, DO Signature and Title		28a. ACTUAL OR PRESUMED TIME OF DEATH 10:20 PM	28b. PRONOUNCED DEAD ON January 04, 2024	28c. TIME PRONOUNCED DEAD 10:20 PM
27b. DATE SIGNED January 08, 2024		27c. LICENSE NUMBER 7561	29. MEDICAL EXAMINER CONTACTED No	30. PLACE OF DEATH Nursing Home
31. IF HOSPITAL		32. MEDICAL EXAMINER'S CASE NUMBER		
33. NAME OF ATTENDING PHYSICIAN IF OTHER THAN CERTIFIER				
35b. REGISTRAR'S SIGNATURE <i>Sara Matt</i>		35b. DATE FILED January 08, 2024		
36. PART I. ENTER the chain of events- diseases, injuries or complications - that directly caused the death. DO NOT enter terminal events such as cardiac arrest, respiratory arrest or resuscitation (tritiation) without showing the etiology. Enter only one cause in line 1.				
If diabetic was an underlying or contributing cause of death be sure to record diabetes in either Part I or Part II of the cause of death section, as.				
a. Alzheimer's Disease				
b. Chronic Diastolic Congestive Heart Failure				
c. Hypertension				
d.				
IMMEDIATE CAUSE (Final disease or condition resulting in death) If ANY, leading to the listed on line a. Enter the UNDERLYING CAUSE (disease or injury that initiated the events resulting LAST)				
DUE TO (OR AS A CONSEQUENCE OF)				
DUE TO (OR AS A CONSEQUENCE OF)				
DUE TO (OR AS A CONSEQUENCE OF)				
PART II. OTHER SIGNIFICANT CONDITIONS contributing to death but not resulting in the underlying cause given in Part I				
39. MANNER OF DEATH Natural		40a. WAS AN AUTOPSY PERFORMED? No	40b. WERE AUTOPSY FINDINGS AVAILABLE PRIOR TO COMPLETION OF CAUSE OF DEATH? Not Applicable	37. DID TOBACCO USE CONTRIBUTE TO DEATH? <input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> Probably <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/> Unknown
41a. DATE OF INJURY		41b. TIME OF INJURY	41c. DESCRIBE HOW INJURY OCCURRED	
41d. INJURY AT WORK		41e. PLACE OF INJURY	41f. IF TRANSPORTATION INJURY	41g. LOCATION SP05058856



United States
Department of
Agriculture

Isabella County, Michigan

Name: _____ Share: _____
Name: _____ Share: _____
Name: _____ Share: _____



DENVER TWP
T15N-R03W
SEC17

CRP CLU

Tract Boundary

Section Lines

Cropland vs Noncropland

Common Land Unit Wetland Determination Identifiers

Common Land Unit* Restricted Use

Limited Restrictions

Exempt from Conservation
Compliance Provisions

Areas of Concern
as of 3/14/22

This box is applicable ONLY for certification maps.

Options only valid if checked.

Shares - 100% OP

<input type="checkbox"/> Certified Organic	<input type="checkbox"/> All Crops - Non-Irrigated
<input type="checkbox"/> CORN - YEL/GR	<input type="checkbox"/> WHEAT - GR (SRW or SWW)
<input type="checkbox"/> SOYS - COM/GR	<input type="checkbox"/> ALFALFA - FG or GZ
<input type="checkbox"/> DRY BEANS - DE	<input type="checkbox"/> MIXFG - FG or GZ

2022 Program Year

CLU Date: April 8, 2022
2020 NAIP Imagery

Farm 7851
Tract 13850

United States Department of Agriculture (USDA) Farm Service Agency (FSA) maps are for FSA Program administration only. This map does not represent a legal survey or reflect actual ownership; rather it depicts the information provided directly from the producer and/or National Agricultural Imagery Program (NAIP) imagery. The producer accepts the data 'as is' and assumes all risks associated with its use. USDA-FSA assumes no responsibility for actual or consequential damage incurred as a result of any user's reliance on this data outside FSA Programs. Wetland identifiers do not represent the size, shape, or specific determination of the area. Areas of Concern represent potential wetland violations (CW, CW-Yr, CWNA, CWTE, MIW, MWM, WX) included in the NRCS Certified Wetland Determination dataset. Refer to your original determination (CPA-026 and attached maps) for exact boundaries and determinations or contact USDA Natural Resources Conservation Service (NRCS). Alternate year NAIP imagery may be displayed for tracts located in other states or along state borders.



DENVER TOWNSHIP

T-15-N ♂ R-3-W

© Community Development Department



Isabella County, Michigan

500

400

899

6000

7000

WISE TOWNSHIP (SEE PAGE 22)

8000 9000

10.1007/s00339-010-0637-0

CHIPPEWA TOWNSHIP (SEE PAGE 8)



Animal Health Associates, P.C.

*Alex P. Imlay, DVM
Linda Rousseau, DVM
Alana Wenban, DVM*

**2039 E. Pickard Rd.
Mt. Pleasant, MI 48858**

(989) 773-3434

NOTES:

-12-