

**DISCHARGE OF PROHIBITED RESTRICTIVE COVENANTS ACT (EXCERPT)**  
**Act 234 of 2022**

**565.865 Discharge of prohibited restrictions; form.**

Sec. 5.

A discharge of prohibited restriction form may be recorded with the register of deeds for the county where the property is located. A discharge form recorded under this section must substantially conform to the following form:

“DISCHARGE OF PROHIBITED RESTRICTION

The document recorded at Liber \_\_\_\_ Page \_\_\_\_ or Instrument number \_\_\_\_ contains language that violates the discharge of prohibited restrictive covenants act.

This document removes and abolishes from the original document any restriction, covenant, or condition, including a right of entry or possibility of reverter, that purports to restrict occupancy or ownership of property on the basis of race, color, religion, sex, familial status, national origin, or other class protected by the fair housing act, title VIII of the civil rights act of 1968, Public Law 90-284, and the discharge of prohibited restrictive covenants act.

☐ If this box is checked, a transcription or copy of the original document with language redacted or removed must be attached to this form.

The undersigned is/are the legal owner(s) of the property described in the document referenced above or an officer of the homeowners' or property owners' association, or the association of co-owners of the condominium, for the property described in the document referenced above.

Property description: \_\_\_\_\_

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Typed or printed name)

STATE OF MICHIGAN

\_\_\_\_\_  
COUNTY

Acknowledged before me in \_\_\_\_\_ County, Michigan, (or) before me using an electronic notarization system under MCL 55.286a in \_\_\_\_\_ County, Michigan, (or) before me using a remote electronic notarization platform under MCL 55.286b on (date), by (name of person acknowledged).

\_\_\_\_\_  
(Notary's signature)

\_\_\_\_\_  
(Notary public's name, typed, as it appears on application for commission)

Notary public, State of Michigan, County of \_\_\_\_\_.

My commission expires \_\_\_\_\_.

(Or, if acting in county other than county of commission) Acting in the County of \_\_\_\_\_.

Prepared by: \_\_\_\_\_ (Name and address of preparer).&quot;

**History:** 2022, Act 234, Imd. Eff. Dec. 13, 2022