

## Chautauqua County Agricultural District Inclusion Worksheet

This application is to be completed by land owners who wish to include a parcel or parcels of predominantly viable agricultural land into one of Chautauqua County's Certified NYS Agricultural Districts. This form, accompanied by a copy of a map which included the parcel(s) identified by tax number, must be received no later than 4:30pm on January 31, in the offices of the Chautauqua County Department of Planning and Development at the address below.

### TO BE COMPLETED BY LAND OWNER

1. Complete and sign worksheet and attach a copy of the tax map which included the identified parcel(s)
2. Return to Chautauqua County Department of Planning and Development no later than January 31 at 4:30pm.

### LAND OWNER DESCRIPTION

Name \_\_\_\_\_ Telephone # \_\_\_\_\_  
Mailing Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Email Address \_\_\_\_\_

### PROPERTY DESCRIPTION

Fill in the following information about the parcel(s) you are requesting to be added to the Agricultural District. If you are unsure of your SBL number or whether or not a parcel is currently receiving an Agricultural Assessment, please see your most recent tax bill or with your local assessor.

SBL Number (Tax ID)	Street Address	Town	Size (acres)	Agricultural Assessment (Yes/No)
<i>100.01-1-1.01</i>	<i>1 Sample Street</i>	<i>Anytown</i>	<i>10.1</i>	<i>No</i>

Describe the current agricultural activity the parcel(s) are being used for: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

### SIGNATURE

I/we attest that the above information is correct to the best of my knowledge and hereby officially request that my property, which is predominantly viable agricultural land be included in the Certified NYS Agricultural District Program. I/we recognize that such lands, once officially included in the Agricultural District, may not be removed until the next eight-year review period for that Agricultural District. I/we understand that this is not an application for an agricultural tax assessment. I/we also acknowledge that this request is subject to review by the Chautauqua County Agricultural and Farmland Protection Board, a public hearing, action by the Chautauqua County Legislature, and certification by the NYS Department of Agriculture and Markets.

SIGNATURE OF LAND OWNER(s): \_\_\_\_\_

DATE: \_\_\_\_\_

Please return this application to:

Chautauqua County Department of Planning & Development  
Lauren Sharp, Junior Planner  
BWB Center 201 West Third Street Suite 115  
Jamestown, New York 14701  
Phone: (716) 661-8245  
Email: [sharp@chqgov.com](mailto:sharp@chqgov.com)