AGRICULTURAL DISTRICT OPEN ENROLLMENT FORM

This form is to be completed by agricultural landowners who wish to request inclusion in an existing agricultural district. The information obtained from this form will be used by the County and State to determine the significance and viability of agriculture.

(NYS Agriculture and Markets Law 25AA, §303-b)

REQUESTS WILL BE ACCEPTED FROM SEPTEMBER 1 TO SEPTEMBER 30.

NOTE: REQUESTS MUST BE RECEIVED BY SEPTEMBER 30 TO BE CONSIDERED.

APPLICANTS MUST FILL OUT ALL APPLICABLE SECTIONS. UNSIGNED APPLICATIONS WILL NOT BE CONSIDERED.

PART I:	LANDOWNER	RINFORMATION				
OWNER NAME:		PHONE: ()				
ADDRESS:		ALT. PHONE: ()			
CITY, ST, ZIP:		EMAIL:	EMAIL:			
	RENTER CONTACT INFO	ORMATION (IF APP	LICABLE)			
RENTER NAME:		PHONE: ()				
MAILING ADDRESS:		ALT. PHONE: (ALT. PHONE: ()			
CITY, ST, ZIP:		EMAIL:	EMAIL:			
PART II:	PROPERTY	DESCRIPTION				
Please describe the proper	ty proposed to be added to	the Agricultural District	and list the	SBL (tax	identification)	
numbers and the Town in v	vhich they are located for al	ll parcels that you wish	to be include	d in the	Agricultural	
District Program. If you are	unsure of your SBL number	s or whether or not a p	arcel is curre	ntly rec	eiving an	
Agricultural Assessment, pl						
		ESCRIPTION		1		
Total number of acres owned						
Total number of acres farmed/cropped						
Total number of acres rented (from another landowner as part of the subject farm)						
Did you file a Schedule F - Form 1040 (Profit or Loss From Farming) with last year's Federal taxes?					es No	
Annual gross income from agricultural operation						
Capital investment in agricul N/A (e.g. a proposed ope	tural operation over past 5 eration/start-up)	years:(please check one \$10,000	e) - \$50,000 🗖	Great	er than \$50,000	
SBL Number (Tax ID)	Street Address	Town	Size (a	Size (acres) Agricultura Assessmer (Y/N)		
100.01-1-1.01	1 Sample Street	Anytown	10.2 No			
					-	

PART III: AGRICULTURAL BUSINESS DESCRIPTION						
Describe the business that is operated or will be operated on the parcel(s) proposed to be added to the Agricultural District.						
Identify the operating status of the farm operation on the subject land Proposed/Start-up (If yes, please attach a "5-year business plan" and a "5-year financial projections plan")						
□ Existing/Established						
CURRENT USE OF SUBJECT	T PARCEL(S) Check all that apply					
AGRICULTURAL USE	ACRES (estimated)					
□ Dairy						
□ Cash Crop (Grain)						
□ Cash Crop (Vegetable)						
□ Orchard/Vineyard						
☐ Livestock (other than dairy)						
□ Poultry						
□ Sugarbush/Maple						
☐ Horticultural Specialties/Christmas Tree						
□ Aquaculture						
□ Other						
PART IV: SIGNA	TIIDE					
5.0.07	nat the above information is correct to the best of my knowledge					
and hereby officially request that my property, which is predon	at the above information is correct to the best of my knowledge					
and hereby officially request that my property, which is predom	ninantly viable agricultural land, be included in the Agricultural					
this program until the eight-year review period for the Agricult.	ded in the Agricultural District Program, may not be removed from					
this program until the eight-year review period for the Agricultural District in which my land is placed. I understand that this is not an application for an agricultural tax assessment. I also acknowledge that this request is subject to a public hearing; review by the						
Erio County Agriculture and Formland Protection Result action	ledge that this request is subject to a public hearing; review by the					
Erie County Agriculture and Farmland Protection Board; action by the Erie County Legislature; and certification by the NYS						
Department of Agriculture and Markets.						
Property Owner	Date					

PLEASE SEND COMPLETED REQUEST FORM TO:

Sarah Gatti, Principal Planner Erie County Department of Environment & Planning 95 Franklin Street, 10th Floor, Buffalo, NY 14202 OR

agriculture@erie.gov

Questions? Contact agriculture@erie.gov