

COMMONWEALTH OF MASSACHUSETTS

TOWN OF MIDDLEBOROUGH

61A

FISCAL YEAR 20_____

AGRICULTURAL OR HORTICULTURAL LAND CLASSIFICATION
GENERAL LAWS CHAPTER 61A§6

INSTRUCTIONS: Complete all sections that apply. Please print or type.

CONTACT PERSON

TELEPHONE #

1. **IDENTIFICATION** Complete this section fully.

Name of applicant(s) _____

Mailing address _____

2. **Property Covered by Application:** Please List the information for up to 5 lots in the grid below.

Map & Lot	Location		# of Acres						
			Vegetables Tobacco Sod Nursery	Dairy, Forage Crops, Field Crops	Orchards, Vineyards	Cranberries	Christmas Trees, Productive Woodland	Contiguous Non-productive Land	Permanent Pasture, Necessary Related Land,
		Acres on Record							
		Corrections							
		Acres on Record							
		Corrections							
		Acres on Record							
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		Acres on Record							
		Corrections							
		Acres on Record							
		Corrections							

3. **STATEMENT OF FARM INCOME IN PRECEDING YEAR.** Supporting documentation, including copies of your federal and state income tax returns, may be requested to verify your income.

A. Gross Sales From Agricultural or Horticultural Use \$ _____

B. Amount Received Under MA or US Soil Conservation or Pollution Abatement Program \$ _____

\$ _____ **Total**

Provide a detailed description of the source of the farm income listed above.

4. **PREVIOUS USE OF LAND.** Was the land valued, assessed and taxed as classified agricultural or horticultural land under Ch. 61A for the prior two fiscal years? Yes _____ No _____

If no, was the use of the land during the prior 2 fiscal years the same as the current use described above?

Yes No

If no, describe in detail the use of the land during the prior 2 fiscal years.

If no, was your farm income during either of the prior 2 fiscal years less than the amount reported above?

Yes No

If yes, list the income for that year \$ _____ Fiscal Year _____

5. **LESSEE CERTIFICATION.** If any portion of the property is leased, the following statement must be signed by each lessee. I hereby certify that the property I lease is being used as described in this application and that I intend to use the property in that manner during the period to which this application applies.

<u>Lessee</u>	<u>Date</u>

6. **SIGNATURE.** All owners must sign here to complete the application. This application has been prepared or examined by me. Under the pains and penalties of perjury, I declare that to the best of my knowledge and belief, it and all accompanying documents and statements are true, correct and complete.

I also certify that I have received a copy of the Property Owner's Acknowledgement of Rights and Obligations under the Classified Agricultural and Horticultural Land Program as part of this application and that I have read and I understand it.

<u>Owner</u>	<u>Date</u>

*If signed by agent, attach copy of written authorization to sign on behalf of taxpayer

DISPOSITION OF APPLICATION (FOR ASSESSORS' USE ONLY)		
<input type="checkbox"/> OWNERSHIP <input type="checkbox"/> MINIMUM ACRES <input type="checkbox"/> USE/CONDITION <input type="checkbox"/> GROSS SALES	<input type="checkbox"/> ALL <input type="checkbox"/> PART <input type="checkbox"/> DEEMED	<input type="checkbox"/> GRANTED <input type="checkbox"/> DENIED <input type="checkbox"/> DEEMED
	BOARD OF ASSESSORS	
		DATE