SCHUYLKILL COUNTY AGRICULTURAL LAND PRESERVATION BOARD

c/o Schuylkill Conservation District 1206 Ag Center Drive Pottsville, PA 17901

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APPLICATION TO THE SCHUYLKILL COUNTY AGRICULTURAL CONSERVATION EASEMENT PROGRAM

LANDOWNER INFORMA	ΓΙΟN:			
Name(s) (as they appear on the deed	d):			
Attach Articles of Inco	rporation, Partnership	Agreement, or Tru	st Information, if appropria	te.
Mailing Address:				
-	Street		City	State Zip
Telephone: Home:	Cell: _		Best time(s) to call:	
E-mail Address:				
If eligible for a federal easen	nent, I choose to parti	cipate in either the	he ACEP or RCPP progra	am? YES/NO (circle one)
Address:				
	Street		City	State Zip
PROPERTY/ TRACT INFO	RMATION:			
Directions from the nearest S	State Route:			
Tax Parcel ID		~	Deed Reference	Office Use
(12-34-5678.000)	Municipality	County	(Book-Page)	ASA Confirmation
		_		
		_		
-				
Total acreage of the farm:			ffered for Preservation: _ h a sketch of the withheld an	
List any Mortgages, Liens, J	udgments, Deed Rest	rictions, Rights-o	of-Ways, etc. For each it	em listed, identify the
holder/owner of that item:		_	•	•
Contact information for the f	farm operator (if diffe	rent from landow	vner): Contact to vi	iew the farm.
FARM OPERATIONS INF	ORMATION:			
Name:	-		Renting to this fa	rmer/operator: Yes / No
Mailing Address:				
Telephone: Home:	Street		City Rest time(s) to call:	State Zip
Email Address:	Con		_ Dest time(s) to can	

Farm Service Agency Farm & Tract Numbers: Is There a CURRENT USDA Conservation Plan for the farm? YES () NO() If yes, Date of Plan? _____ YES () IS there a CURRENT Nutrient or Manure Management Plan? NO() If yes, Date of Plan? _____ I hereby authorize the conservation plan preparer to release copies of the conservation plan and the Schuylkill County Conservation District to release copies of the approved Act 38 nutrient management plan (if applicable) to the County Agricultural Land Preservation Board and the Bureau of Farmland Preservation as required under Act 43 criteria for easement purchase. Farm Operator's Signature: ______ Date: _____ ** Please complete this section using information from the most current growing and harvest season. ** A. Land Use Information: (Year: ____) Number of acres in cropland _____ Number of acres in pasture _____ Number of acres in woodland _____ Number of acres in buildings/roads _____ Number of acres in other uses _____ Number of acres subject to program _____ TOTAL # of acres of farm _____ B. Crop Information: (Year: _____) Type of Crops Number of Acres in **Yield Per Acre for Total Receipts for** Grown Each Crop Each Crop Each Crop, if any 1 TOTAL receipts for (Year: ____) \$_____ C. Livestock Information: (Year: ____) Product(s) Sold Amount **Total Receipts for Products Sold** TOTAL receipts for animal products sold in (Year: _____) TOTAL receipts for animals sold in (Year: D. Total gross receipts for tract to be preserved for (Year: _____) E. Total gross receipts for farm operation for (Year:

FARM OPERATIONS INFORMATION CONTINUED:

LANDOWNER SIGNATURES: All persons listed on the current deed must sign this section

I/We do hereby verify that I/We have reviewed this application. I/We further verify that the application correctly and accurately depicts the condition of the land and that such statements are true and correct to the best of my/our knowledge, information, and belief. These statements are being given by me/us to induce official action on the part of the Lebanon County Agricultural Land Preservation Board, its agents, officers, servants, and employees.

I/We do acknowledge that a conservation plan and a manure management plan or nutrient management plan per Commonwealth of PA regulations, will be required to be developed for the farm if the application is accepted to have this land preserved by the Schuylkill County Agricultural Land Preservation Board. These plans, when followed, will ensure that the farm is operated in a responsible manner to sustain natural resources for current and future generations.

Print Name	Signature	Date
Print Name	Signature	Date
Print Name	Signature	Date
Print Name	Signature	Date