

TOWN OF DUANESBURG

Application# _____

Agricultural Data Statement

Date: _____

Instructions: This form must be completed for any application for a special use permit, site plan approval, use variance or a subdivision approval requiring municipal review that would occur on property within 500 feet of a farm operation located in a NYS Dept. of Ag & Markets certified Agricultural District.

Applicant	Owner if Different from Applicant
Name: _____ Address: _____ _____	Name: _____ _____ _____

1. Type of Application: ☐ Special Use Permit; ☐ Site Plan Approval; ☐ Use Variance; ☐ Area Variance; ☐ Subdivision Approval (circle one or more)
2. Description of proposed project:

3. Location of project: Address: _____
Tax Map Number (TMP) _____
4. Is this parcel within an Agricultural District? ☐ YES ☐ NO (Check with your local
5. If YES, Agricultural District Number _____ assessor if you do not know.)
6. Is this parcel actively farmed? ☐ YES ☐ NO
7. List all farm operations within 500 feet of your parcel. Attach additional sheet if necessary.

NAME: _____ ADDRESS: _____ _____	NAME: _____ ADDRESS: _____ _____
Is this parcel actively farmed? <input type="checkbox"/> YES <input type="checkbox"/> NO	Is this parcel actively farmed? <input type="checkbox"/> YES <input type="checkbox"/> NO
NAME: _____ ADDRESS: _____ _____	NAME: _____ ADDRESS: _____ _____
Is this parcel actively farmed? <input type="checkbox"/> YES <input type="checkbox"/> NO	Is this parcel actively farmed? <input type="checkbox"/> YES <input type="checkbox"/> NO

Signature of Applicant_____
Signature of Owner (if other than applicant)Reviewed by: _____
Dale R. Warner_____
Date

Revised 6/30/08

NOTE TO REFERRAL AGENCY: County Planning Board review is required. A copy of the Agricultural Data Statement must be submitted along with the referral to the County Planning Department.