AV-5 Web 3-13

Application for Agriculture, Horticulture, and Forestry Present-Use Value Assessment (G.S. 105-277.2 through G.S. 105-277.7)

Mailing Address of Owner City State Zip Code Home Telephone Number Work Telephone Number Ext. Cell Phone Number Instructions Application Deadline: This application must be filed during the regular listing period, or within 30 days of a notice of a change in valuation, or with 00 days of a transfer of the land. Where to Submit Application: Submit this application to the county tax assessor where this property is located. County it as assessor addresses. Office Use Only: This application Submit this application to the county tax assessor where this property is located. County it as assessor addresses. Office Use Only: This application is for: (check all that apply) AGRICULTURE (includes Aquaculture) HORTICULTURE FORESTRY Enter the Parcel Identification Number, acreage breakdown, and acreage total for each tax parcel included in this application in Production In LAND LAND LAND LAND SITE Comments: PARCEL ID OPEN LAND OPEN LAND IN LAND LAND LAND LAND SITE COMMENTS: OPEN LAND LAND SITE COMMENTS: OPEN LAND LAND LAND SITE COMMENTS: OPEN	County of		, NC						Tax	Year	
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Home Telephone Number	City			·		***************************************			State	Zip Code	
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Comments: Yes No Does the applicant own property in other counties that is also in present-use value and is within 50 miles of this property? YES, list the county or counties and parcel identification number(s): County: Parcel ID: County: Parcel ID: MPORTANT! GRICULTURE and HORTICULTURE applications with LESS than 20 acres of woodland generally need to complete PARTS and 4. GRICULTURE and HORTICULTURE applications with MORE than 20 acres of woodland generally need to complete PARTS 3, and 4. ORESTRY applications need to complete PARTS 1, 3, and 4.	PARCEL ID	The second second of the second second	not in							(Describe in	
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<u>DDITIONALLY</u> , applications for CONTINUED USE of <u>existing</u> present-use value classification need to complete PART 5.									NOTE OF THE OWNER OWNER OF THE OWNER		DART 5
	DDITIONALLY, application	s for CONTIN	JED USE of	existing	presen	t-use valu	e clas	sificati	on need	to complete	PART 5.

Part 1. Ownership				
On what date did the app	licant become the owner of the prope	erty? DATE:		
If owned less than four fu	ll years on January 1, provide: Name	e of Previous Owner:		enne en et c'est d'annéel n'es fonder an éantain ann an ensière es éastan éan agus agus annéel an a
How the Applicant is Re	lated to the Previous Owner:			
Yes No Did	one of the applicants reside on the p	roperty on January 1 of th	ne year for which this application is r	nade?
If YI	ES, provide name of resident:			
Yes No Are	any of the acres leased out to a farm	er? If YES, indicate: Nur	mber of acres leased out:	
Nan	ne of farmer leasing the land:		Phone:	
Choose the legal	form of ownership from "a	- e" below, and ans	swer the guestions, if any, t	for that ownership:
a. One Individu		l and Wife (as tenants by		•
	tity. (Circle one: Corporation, Lim		Partnership) List all the direct shar	eholders, members, or
	e business entity and their farming a			
Member:		Farming Activities:		
Member:		Farming Activities:		
Member:		Farming Activities:		
Member:	➤ Are any of the direct shareholders,	Farming Activities:		
	G.S. 105-277.2(5a) for the definitional business of the business entity:			-
Trustee(s):	e trustee(s), frame of the trust, and all	Name of tru	ıst.	
Beneficiary:		Farming Activities:		
Beneficiary:		Farming Activities:		
Beneficiary:		Farming Activities:		
Beneficiary:		Farming Activities:		
Yes No	- Are any of the beneficiaries either a of those business entities or trusts individual's farming activities.		i.e. not an individual)? If YES, you r	
	Once you have reached the individed relatives of the creator? (See G.S. emmon. List the tenants and their per	105-277.2(5a) for the def	finition of relative.)	her the trust's creator or
Owner		% Owner		%
Owner		% Owner		%
	Are any of the tenants either a bus entity or trust. You must complete labeling each copy with the name of	the business entity section of the business entity or true	on only or trust section only for each ust.	
The Tax Assess	or may contact you for additional	information after review	ing this application.	

Part 2. Agriculture and Horticulture

For the past three years and for each tax parcel within the farm unit, enter the agricultural or horticultural products actually produced on the land and the gross income from the sale of the products, including livestock, poultry, and aquatic species. INCOME INFORMATION IS SUBJECT TO VERIFICATION.

If payments are received from any governmental soil conservation or land retirement program, indicate the acres and amount of income in the table below. Provide the name of the program in the Product column.

Do not include income received from the rental of the land. Income must be from the sale of the product.

	ONE YEAR AGO 20		TWO YEARS A	AGO 20		THREE YEARS AGO 20			
Parcel ID	Product	Acres	Income	Product	Acres	Income	Product	Acres	Income
	Totals			Totals			Totals		
	¥		3						
	Totals			Totals			Totals		
	Totals			Totals			Totals		
-									
	Totals			Totals			Totals		
	Totals			Totals			Totals		
Yes	prepared? If YES , attach a copy. If NO , attach a full explanation of your operation that contains at least the following: year each tract was planted, gross income from each tract, site management practices, number of trees per acre, and expected date of harvesting for each tract.								
	If this application covers an aquatic species farming operation, enter the total pounds produced for commercial sale annually for the last three years: Year 20 : Ibs, Year 20 : Ibs, Year 20 : Ibs							1	
Part 3	Part 3 Forastry								

Part 3.	Forestry
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Attach a complete copy of your forest management plan. Indicate below who prepared the plan:

N.C. Division of Forest Resources

Consulting Forester

Owner

Other

Note: The property must be actively engaged in the commercial growing of trees under a sound management program as of January 1 of the year for which application is made.

Key elements in a written plan for a sound forestland management program are listed below:

- 1. Management and Landowner Objectives Statement—Long range and short range objectives of owner(s) as appropriate.
- 2. Location--Include a map or aerial photograph that locates the property described and also delineates each stand referenced in the "Forest Stand(s) Description/Inventory and Stand Management Recommendations" (item 3 below).
- 3. Forest Stand(s) Description/Inventory and Stand Management Recommendations -- Include a detailed description of various stands within the forestry unit. Each stand description should detail the acreage, species, age, size (tree diameter, basal area, heights), condition (quality and vigor), topography, soils and site index or productivity information. Stand-specific forest management practices needed to sustain productivity, health and vigor must be included with proposed timetable for implementation.
- Regeneration-Harvest Methods and Dates--For each stand, establish a target timetable for harvest of crop trees, specifying the type of regeneration-harvest (clear cut, seed tree, shelter wood, or selection regeneration systems as applicable).
- Regeneration Technique--Should include a sound proposed regeneration plan for each stand when harvest of final crop trees is done. Specify intent to naturally regenerate or plant trees.

NOTE: Forest management plans can and should be updated as forest conditions significantly change (e.g. change in product class mix as the stand ages and grows, storm damage, insect or disease attack, timber harvest, thinning, wildfire). The county will audit plans periodically and, to remain eligible for use-value treatment, the plan must be implemented.

	<u> </u>						
Part 4. Affirmation							
AFFIRMATION OF APPLICANT – I (we) the undershereto have been examined by me (us) and to to (we) fully understand that an ineligible transfer oproduction under a sound management programeligibility will result in removal from the program	he best of my (our) knowledge and belief of the property or failure to keep the prope am will result in the loss of eligibility. I	f are true and correct. In addition, I erty actively engaged in commercial (we) fully understand that loss of					
Signature of Owner (All tenants of a tenancy in common must sign.)	Signature of Owner (All tenants of a tenancy in common must sign.) Title Date						
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Signature of Owner (All tenants of a tenancy in common must sign.)	Title	Date					
Part 5. Continued Use (Complete only if the property is currently in Present-Use Value and you are applying for immediate eligibility under the Continued Use exception. See G.S. 105-277.3(b2)(1) for full details.) I certify: 1. The property is currently in Present-Use Value.							
 I intend to continue the current use of the land under which it currently qualifies. I understand I will be responsible for all deferred taxes due because of any disqualification. I ACCEPT FULL LIABILITY FOR ANY EXISTING DEFERRED TAXES. 							
Note: If the property is currently in Present-Use Value and liability is not accepted, the full amount of the deferred taxes will typically be due in the name of the grantor immediately. Liability need not be accepted and no deferred taxes are due for qualifying transfers pursuant to G.S. 105-277.3(b) and (b1). For example, liability does not need to be accepted for qualifying transfers to relatives. However, any deferred taxes existing at the time of transfer will remain a lien on the property. Owners already receiving Present-Use Value on properties not included in this application may wish to review the alternative provisions of G.S. 105-277.3(b2)(2).							
Signature of Owner (All tenants of a tenancy in common must sign.)	Title	Date					
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FOR OFFICE USE ONLY: APPROVED DENIED BY:	REASON FOR DENIAL:						