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**Application for Participation In The Transylvania County ENHANCED Voluntary Agricultural District Program**

INSTRUCTIONS: Before completing the application please review the Transylvania County Voluntary Agricultural District Ordinance, and then fill out the form as accurately and completely as possible.

APPLICANT/S: Name/s: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_State:\_\_\_\_\_\_\_ Zip Code:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone Number: (Home)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Work or Cell)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| **Property Information (enter all qualifying parcels to be entering in EVAD)** | | | | |
| **Name of Owner** | **Street Address** | **Parcel #** | **# of acres** | **USDA Farm #** |
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You must have a conservation plan on file with the Transylvania County Soil and Water Conservation /Natural Resources Conservation Service covering all of the acreage that you intend to enroll. Please contact their office to confirm your conservation plan and obtain the signature of a Conservationist in that office.

Conservationist signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(NO PROPERTY WILL BE ACCEPTED IN AN ENHANCED VOLUNTARY AGRICULTURAL DISTRICT UNLESS A CONSERVATION PLAN IS ON FILE.)

OWNER(S) CERTIFICATION I (We), the applicant(s), hereby certify that, to the best of my (our) ability, the foregoing application is complete and accurate. We further understand that acceptance into the Enhanced Voluntary Agriculture District is a binding agreement on self, all successors and assigns with Transylvania County and cannot be revoked for at least 10 years. If certified by the Agricultural Advisory Board, I (we) agree to sustain, promote, and encourage responsible agriculture in the district, support protection against nuisance suits, and I (we) agree to prohibit non-farm use of the land under this program for a period of ten years from the date certified by the Agricultural Advisory Board. In addition, I agree to follow an NRCS Soil Conservation Plan. This agreement is an irrevocable 10 year commitment. Your contract with the county will be reviewed at the end of the 10 year term. At that time you will have 30 days to withdraw from the agreement, or the property will be automatically re-enrolled a 3 year term.

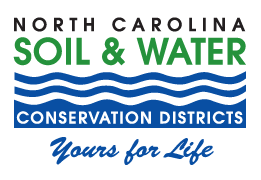
Landowner Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Ag Advisory Board Chairperson name (printed):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Ag Advisory Board Chairperson Approval Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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