BENTON COUNTY DEPARTMENT OF HEALTH AND LAND USE ADMINISTRATION

P.O. BOX 327
VINTON, IA 52349
PHONE: (319) 472-3119

BENTON COUNTY AGRICULTURAL LAND PRESERVATION ORDINANCE

APPLICATION FOR FARM EXEMPTION

APPLICANT:_____

ADDRESS:_____**PHONE:**_____

OWNER(S):_____

ADDRESS:_____**PHONE:**_____

LEGAL DESCRIPTION:_____

_____

REASONS FOR CLAIMING EXEMPTION:_____

_____

_____

_____

This application must be signed by the person seeking an exemption from the AGRICULTURAL LAND PRESERVATION ORDINANCE, and the owner(s) of the parcel for which the exemption is sought, if the applicant is not the owner. The fee for this application is twenty-five ($25.00) dollars. Payment MUST accompany the application.

_____

Applicant Signature **Owner(s) Signature**

NOTE: Benton County reserves the right to request that the applicant for a farm exemption provide supportive documentation, as may be needed, in review of the application submitted.

******************************FOR OFFICE USE ONLY**************************

Action taken by the Board of Supervisors:_____

By: _____**, Administrative Officer**