

2. I hereby certify the following:

I am (one of) the owner(s)/operator(s) of _____,
(NAME OF COMMERCIAL FARM)

Block(s) _____, Lot(s) _____,

located at _____,
(ADDRESS OF COMMERCIAL FARM)

in the Municipality of _____,

in the County of _____.

3. I hereby certify that:

a. _____ is 5 acres or more, produces
(NAME OF COMMERCIAL FARM)
agricultural and/or horticultural products worth \$2,500 or more annually, and is eligible for differential property taxation pursuant to the Farmland Assessment Act of 1964.

*If your farm is farmland assessed, please attach a copy of the filed **Farmland Assessment Form** (including **Supplemental Farmland Assessment Form**) and **Municipal Notice of Property Assessment** for each tax lot.*

(in the alternative that the commercial farm is less than 5 acres)

b. _____ is less than 5 acres, produces
(NAME OF COMMERCIAL FARM)
agricultural and/or horticultural products worth \$50,000 or more annually and otherwise satisfies the eligibility criteria for differential property taxation pursuant to the Farmland Assessment Act of 1964.

If your farm is less than 5 acres, please provide proof that: 1) the land is currently, and has been for at least the last two (2) successive years, actively devoted to agricultural or horticultural use, and that 2) the amount of gross sales of agricultural or horticultural products produced on the land have averaged at least \$500 per year during the 2-year period, or there is clear evidence of anticipated yearly gross sales and such payments amounting to at least \$500 within a reasonable period of time.

4. Please attach copies of receipts and tax forms (including Schedule F (Form 1040) – Profit or Loss from Farming) to provide proof of income.

the SADC in accordance with the provisions of the Administrative Procedure Act, N.J.S.A. 52:14B-1 et seq., and the Uniform Administrative Procedure Rules, N.J.A.C. 1:1, within 45 days from receipt of the board's final determination.

- a. The decision of the SADC shall be considered a final administrative agency decision.
- b. If the board's decision is not appealed within 45 days, the board's decision is binding.

DATED: _____

(SIGNATURE OF REQUESTOR)

Upon Completion, Mail this Application to:

**Attn: Ms. Katherine Coyle
Morris County Agriculture Development Board
PO Box 900
Morristown, NJ 07963-0900
(973) 829-8120
Fax (973) 326-9025**