

**APPLICATION FOR THE CREATION OF  
OR ADDITION TO AGRICULTURAL/FORESTAL  
DISTRICTS**

This application form shall be accompanied by: (1) a United States Geological Survey 7.5 minute topographic map that clearly shows the boundaries of the district and each addition and boundaries of properties owned by each applicant. (2) A Department of Transportation general highway map for the locality that shows the general location of the proposed district shall also accompany each application form. (3) A Farm Services Map from the USDA Service Office, contact person William Beasley, 757-787-3581. (4) A CAMA (real estate) card for each parcel listed below from the Office of the Commissioner of Revenue in Eastville, Va.

**SECTION I: TO BE COMPLETED BY APPLICANT(S)**

1. GENERAL LOCATION OF THE DISTRICT: \_\_\_\_\_  
\_\_\_\_\_

2. TOTAL ACREAGE IN THE DISTRICT OR ADDITION: \_\_\_\_\_

3. NAME OF PERSON TO CONTACT: \_\_\_\_\_

PHONE NO. \_\_\_\_\_ E-MAIL: \_\_\_\_\_

4. LANDOWNERS APPLYING FOR THE DISTRICT:

**A. PRINTED NAME OF OWNER:** \_\_\_\_\_

SIGNATURE OF OWNER OR POA: \_\_\_\_\_  
(If POA, please provide a legal copy of documentation.)

LEGAL ADDRESS: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

TAX MAP PARCEL: \_\_\_\_\_ PARCEL RECORD NO.: \_\_\_\_\_

ACREAGE: \_\_\_\_\_ LAND BOOK REFERENCE: \_\_\_\_\_

**B. PRINTED NAME OF OWNER:** \_\_\_\_\_

SIGNATURE OF OWNER OR POA: \_\_\_\_\_  
(If POA, please provide a legal copy of documentation.)

LEGAL ADDRESS: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

TAX MAP PARCEL: \_\_\_\_\_ PARCEL RECORD NO.: \_\_\_\_\_

ACREAGE: \_\_\_\_\_ LAND BOOK REFERENCE: \_\_\_\_\_

**C. PRINTED NAME OF OWNER:** \_\_\_\_\_

SIGNATURE OF OWNER OR POA: \_\_\_\_\_  
(If POA, please provide a legal copy of documentation.)

LEGAL ADDRESS: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

TAX MAP PARCEL: \_\_\_\_\_ PARCEL RECORD NO.: \_\_\_\_\_

ACREAGE: \_\_\_\_\_ LAND BOOK REFERENCE: \_\_\_\_\_

**D. PRINTED NAME OF OWNER:** \_\_\_\_\_

SIGNATURE OF OWNER OR POA: \_\_\_\_\_  
(If POA, please provide a legal copy of documentation.)

LEGAL ADDRESS: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

TAX MAP PARCEL: \_\_\_\_\_ PARCEL RECORD NO.: \_\_\_\_\_

ACREAGE: \_\_\_\_\_ LAND BOOK REFERENCE: \_\_\_\_\_

5. THE PROPOSED CONDITIONS TO CREATION OF THE DISTRICT PURSUANT TO § [15.2-4309](#) OF THE CODE OF VIRGINIA.

6. THE PROPOSED PERIOD BEFORE FIRST REVIEW: **10 YEARS unless adding to an existing AFD.**

**SECTION II: TO BE COMPLETED BY LOCAL GOVERNING BODY**

1. Real Estate Taxes Paid: \_\_\_\_\_  
(Applications that list property with unpaid real estate taxes will be rejected.)

2. Date referred to the advisory committee: \_\_\_\_\_

3. Date referred to the local planning commission: \_\_\_\_\_

4. Date submitted to the local governing body: \_\_\_\_\_

5. Date of action by the local governing body: \_\_\_\_\_

\_\_\_\_\_ Approved      \_\_\_\_\_ Modified      \_\_\_\_\_ Rejected

A non-refundable filing fee of \$500.00 is required payable to County Treasurer in care of the Northampton County Dept. of Planning & Zoning, P.O. Box 538, Eastville, VA 23347.