



Zoning Permit Special Farm Uses

Property Information:

Address/Street (Only):

Tax Map Number: Grid: Parcel(s): Lot(s):

Total Size Farm: Acres:

Property is zoned: RC RR R-ED R-20 R-12 R-SC

Owner Information

Owner Name:

Mailing address:

City: State: Zip Code:

Phone: Email:

Special Farm Use Type Requested:

- | | |
|--|---------------------------------------|
| Value-Added Agricultural Processing | Agritourism |
| Value-Added Agricultural Processing with On-Site Sales | Community Supported Agriculture (CSA) |
| Farm Stand (Less than 300 square feet) | Food Hub |
| Farm Stand (300 square feet or larger) | Riding Academy and Stable |
| Pick-Your-Own Enterprises | |

Representative Information:

Name:

Phone: Email:

Association with Owner:

Explanation of the Justification for the Requested Zoning Permit (please address each criteria for the requested use as listed in Section 128.0.I or 128.0.O, as applicable. If you need more room, please enter as much as you can on this page and then continue on an attached sheet.)

List of Attachments/Exhibits (Please remember to include the required plan of the property.)

Signatures

Owner: **Date:**

Owner (2): **Date:**

Additional owner signature? X the box to the left and attach a separate signature page.

Representative Signature **Date:**

FEE: \$25.00 (payable to Director of Finance)

For DPZ office use only:

Zoning Permit No.:

Notes: