

The Commonwealth of Massachusetts

61	61A	61B
Assessors' Use only		
Date Received		
Application No.		

Name of City or Town

**Fiscal Year _____ Application for
Forest-- Agricultural or Horticultural -- Recreational Land Classification
General Laws Chapter 61, §§ 1 & 2 – Chapter 61A, § 6 – Chapter 61B, § 3**

INSTRUCTIONS: Complete all sections that apply. Please print or type.

A. IDENTIFICATION. Complete this section fully.

Name of Applicant(s): _____				
Mailing Address: _____				
No. Street		City/Town		Zip Code
Property Covered by Application:				
Location	Parcel Identification (Map-Block-Lot)	Deed Reference (Book & Page/Cert. No.)	Total Acres	Acres to be Classified

B. TYPE OF CLASSIFICATION. Check the classification you are seeking and provide the required information.

FOREST Attach State Forester's Certificate and Approved Forest Management Plan.

AGRICULTURAL or HORTICULTURAL

1. Current use of land. List by classes established by the Farmland Valuation Advisory Commission, if applicable.

Land Use by Class	No. of Acres	Specific Use, Crops Grown
a. Vegetables, Tobacco, Sod and Nursery Cropland		
b. Dairy, Beef and Hay Cropland		
c. Orchards, Vineyards and Blueberries Cropland		
d. Cranberries		
e. Christmas Trees		
f. Productive Woodland (Attach copy of State Forester's Certificate and Approved Management Plan if initial application, or new/revised plan)		
g. Cropland Pasture, Permanent Pasture and Necessary and Related Land		
h. Contiguous Non-productive Land		
i. Other Agricultural or Horticultural (Specify)		

2. Statement of income in preceding year. Supporting documentation, including copies of your federal and state tax income returns, may be requested to verify your income.

a. Gross sales from agricultural or horticultural use.....\$ _____

b. Amount received under MA or US Soil Conservation or Pollution Abatement Program.....\$ _____

Total (Provide a detailed description of the source of the farm income listed above).....\$ _____

3. Previous use of land. Was the land valued, assessed and taxed as classified agricultural or horticultural land under c. 61A for the prior 2 fiscal years? Yes No

If no, was the use of the land during the prior 2 fiscal years the same as the current use described above? Yes No

If no, describe in detail the use of the land during the prior 2 fiscal years _____

If no, was your farm income during either of the prior 2 fiscal years less than the amount reported above?
Yes No

If yes, list the income for the year \$ _____ Fiscal year _____

RECREATIONAL Land may qualify based on its condition or recreational use.

1. Is the land retained in substantially a natural, wild or open condition? Yes No
 Is the land in a landscaped or pasture condition or managed forest condition? Yes No
 If managed forest, attach copy of State Forester's Certificate and Approved Management Plan if initial application, or new/revised plan.
 Does the land allow to a significant extent the preservation of wildlife and other natural resources? Yes No
 If yes, indicate which natural resources are preserved:

Ground Water/Surface Water <input type="checkbox"/>	Clean Air <input type="checkbox"/>	Vegetation <input type="checkbox"/>
Rare/Endangered Species <input type="checkbox"/>	Geologic Features <input type="checkbox"/>	Scenic Resources <input type="checkbox"/>
High Quality Soils <input type="checkbox"/>	Other (specify) _____	Other (specify) _____

2. Is the land used primarily for recreational use? Yes No
 If yes, indicate for which recreational activity:

Archery <input type="checkbox"/>	Picnicking <input type="checkbox"/>	Camping <input type="checkbox"/>	Nature Study & Observation <input type="checkbox"/>
Fishing <input type="checkbox"/>	Golfing <input type="checkbox"/>	Hang gliding <input type="checkbox"/>	Non-commercial Youth Soccer <input type="checkbox"/>
Hiking <input type="checkbox"/>	Target Shooting <input type="checkbox"/>	Hunting <input type="checkbox"/>	Private Non-commercial Flying <input type="checkbox"/>
Boating <input type="checkbox"/>	Skiing <input type="checkbox"/>	Swimming <input type="checkbox"/>	Horseback Riding <input type="checkbox"/>
			Commercial Horseback Riding & Equine Boarding <input type="checkbox"/>

How often is the land used for recreational activities? _____
 How many people use the land for those activities? _____
 Is the land open to the general public? Yes No
 If no, to whom is its use restricted? _____
 Is the land used for horse racing, dog racing or any sport normally undertaken in a stadium, gymnasium or similar structure? Yes No

C. LESSEE CERTIFICATION. If any portion of property is leased, the following statement must be signed by each lessee.

I hereby certify that the property I lease is being used as described in this application and that I intend to use the property in that manner during the period to which the application applies.

Lessee	Date
_____	_____
_____	_____
_____	_____

D. SIGNATURE. All owners must sign here to complete the application.

This application has been prepared or examined by me. Under the pains and penalties of perjury, I declare that to the best of my knowledge and belief, it and all accompanying documents and statements are true, correct and complete. I also certify that I have signed and attached a Property Owner's Acknowledgement of Rights and Obligations under classified forest, agricultural or horticultural or recreational land programs, as part of this application.

Owner	Date
_____	_____
_____	_____

If signed by agent, attach copy of written authorization to sign on behalf of taxpayer.

DISPOSITION OF APPLICATION (ASSESSORS' USE ONLY)

Ownership <input type="checkbox"/>	All <input type="checkbox"/>	GRANTED	Date Voted/Denied _____
Min. Acres <input type="checkbox"/>	Part <input type="checkbox"/>		Date Notice Sent _____
Use/Condition <input type="checkbox"/>	Deemed <input type="checkbox"/>		Board of Assessors
Gross Sales <input type="checkbox"/>	All <input type="checkbox"/>	DENIED	_____
	Part <input type="checkbox"/>		_____
	Deemed <input type="checkbox"/>		Date _____