

Clean and Green Application Instructions

- ◆ Act 156 of 1998 requires that this application be RECEIVED by the Assessment Office within thirty (30) days of the transfer or split-off of land. Failure to comply could result in a civil penalty of \$100.
 - ◆ All signatures on this application must be **notorized**.
 - ◆ A one-time application and recording fee of **\$18.50** must be remitted with the application, payable to “Lycoming County”.
 - ◆ Please return this application to: Lycoming County Assessment Office, 48 West Third Street, Williamsport PA 17701.
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1. PARCEL – parcel number(s) of the property for which preferential assessment is being sought.
2. ACREAGE – total acreage for each parcel for which preferential assessment is being sought.
3. NAME – Name of the property owner
4. ADDRESS – mailing address of the owner
5. SCHOOL DISTRICT, MUNICIPALITY, COUNTY – where property is located
6. Which category most nearly represents the use of the **majority** of your land?
7. Has the land been actively farmed in the past three years either by you or by someone else? Please indicate the number of acres actually farmed or pastured and what crops or livestock are raised. You may be required to submit documentation such as a Schedule F or Farm Services report.
8. How many acres are forest lands that are capable of producing wood products? Do not include land with sumac, scrub brush, wetlands, etc. Also indicate if the land is enrolled in a forestry management plan. Please include a copy of the plan.
9. Is any of the land enrolled in any other government programs? Programs include Agricultural Security Areas, Conservation Easements, CRP, etc.
10. Give acreage in each category for land you do not intend to apply for Clean & Green. Please provide a map to indicate the location of the land that is not to be enrolled.
11. Is the land leased for minerals?



AMENDED APPLICATION FOR PENNSYLVANIA FARMLAND AND FOREST LAND ASSESSMENT ACT "CLEAN AND GREEN"

Original Application Information: Deed Book / Page Effective Year

All Questions MUST be answered. Please type or print.

1. Parcel(s):

2. Acreage for each parcel:

3. Name: (Last) (First) (MI)

4. Address: (Street, RR, or Box#)

(City) (State) (Zip Code)

5. The property is located in (School District)

(City, Township, Borough) (County)

6. Under which category do you intend to apply?

Agricultural Use Agricultural Reserve Forest Reserve

7. Has the land been actively devoted to agricultural use (farmed) for the past three years? Yes No

If yes, please indicate the number of acres actually farmed for each parcel

What crops are grown? What livestock are raised?

8. How many acres are forest land that produce wood products?

If you have forest lands, are you enrolled in any forest management program? Yes No

If yes, please provide a copy of the forestry plan and the forester's name

9. Are any of the acres enrolled in any other government program? Yes # of acres No

If yes, which programs?

10. For any additional land you own which might be eligible for use-value assessment but for which you do not intend to apply, give acreage in each category. Please provide a map.

Agricultural Use (Actively Farmed) Forest Reserve (Wooded) Agricultural Reserve (All other land)

11. Is the land in this application leased for minerals? Yes No

12. If you have documentation supporting soil types or timber types, such as a conservation plan or a forestry management plan, please supply copies of this information with your application. This is not, however, a requirement for submitting an application.
13. IN THE EVENT OF A CHANGE IN OWNERSHIP OF A PORTION OF THE LAND, OR OF ANY TYPE DIVISION OR CONVEYANCE OF THE LAND, THE APPLICANT HEREBY ACKNOWLEDGES THAT, IF HIS APPLICATION IS APPROVED FOR PREFERENTIAL ASSESSMENT, ROLL-BACK TAXES UNDER SECTION 5.1 OF THE ACT MAY BE DUE FOR A CHANGE IN USE OF THE LAND, A CHANGE IN OWNERSHIP OF ANY PORTION OF THE LAND, OR ANY TYPE OF DIVISION OR CONVEYANCE OF THE LAND.

The applicant for preferential assessment hereby agrees, if his application is approved for preferential assessment, to submit thirty days notice to the county assessor of a proposed change in use of the land, a split-off portion of the land, or a conveyance of the land.

The undersigned declares that this application, including all accompanying schedules and statements, has been examined by him/her and to the best of his/her knowledge and belief is true and correct.

(Signature of Owner/Corporation Name)	(Date)
(Signature of Corporate Officer)	(Title)
(Assessor)	(Date)

ACKNOWLEDGEMENT

COMMONWEALTH OF PENNSYLVANIA:

COUNTY OF LYCOMING : SS.

On this, the _____ day of _____, 20____, before me, a Notary

Public, the herein signed, did personally appear _____

known to me (or satisfactorily proven) to be the person whose name is subscribed and executed the same for the purposes therein contained.

IN WITNESS WHEREOF, I have hereunto set my hand and notarial seal.

Notary Public: _____

My commission expires:
(SEAL)