



Application for Tax Exemption of Agricultural and Horticultural Buildings and Structures

Read information and instructions on Form RP-483-I.

A separate application must be filed for each building and structure for which exemption is sought.

Name(s) of owner(s)			
Mailing address of owner(s) (number and street or PO Box)		Location of property (street address)	
City, village, or post office	State	ZIP code	City, town, or village State ZIP code
Daytime contact number	Evening contact number		School district
Email address		Tax map number: Property identification (see tax bill or assessment roll)	

1. Description of building or structure (if necessary attach plans or specifications): _____

a. Current use or proposed use of building or structure: _____

b. Describe any real property which was replaced or removed in connection with the construction or reconstruction of the building or structure: _____

2. Date construction or reconstruction was started: _____

Date construction or reconstruction was completed: _____

Cost of construction or reconstruction: _____

3. Is the building or structure, or any part thereof, used or proposed to be used for retail sale of agricultural or horticultural products? Yes No

Is the building or structure, or any part thereof, used or proposed to be used for the processing of agricultural or horticultural products other than maple syrup, honey, royal jelly, bee pollen, propolis, or beeswax? Yes No

Is the building or structure, or any part thereof, used for the storage of honey bees? Yes No

If the answer is Yes to any of the above questions, describe in detail on a separate sheet the retail sale operation and/or the nature of the processing and what portion of the building or structure is used for such purposes.

Is the building or structure, or any part thereof, used or proposed to be used in the production of maple syrup, honey, royal jelly, bee pollen, propolis, or beeswax? Yes No

4. Is the building or any portion thereof, used for residential purposes? Yes No

If the answer is Yes:

a. Are all occupants employees or the immediate families of employees who are primarily employed in connection with the operation of lands actively devoted to agricultural or horticultural use? Yes No

b. If any occupants are related by blood or marriage to the applicant, state the relationship: _____

c. Briefly describe the nature of the duties performed by any employee(s) who reside in the building: _____

5. Identification of lands actively devoted to agricultural or horticultural use:

a. Total acreage: _____

b. Is this land part of the same parcel on which the newly constructed or reconstructed building or structure is located? Yes No

If the answer is *No*, identify the parcel(s) containing such land:

Tax map number or section/block/lot: _____

c. Briefly describe the agricultural or horticultural use of such land: _____

Certification

I (we) hereby certify that the information on this application constitutes a true statement of fact to the best of my (our) knowledge.

Signature	Date
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Signature	Date
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This Area for Assessor's Use Only

Date application filed: _____

Applicable taxable status date: _____

Application approved

Application disapproved

Assessed valuation of parcel including new construction or reconstruction: \$ _____

Assessed valuation of parcel excluding new construction or reconstruction: \$ _____

Assessed valuation of exemption granted (difference between above): \$ _____

Assessor's signature	Date
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