

**Application for Removal**  
**\_\_\_\_\_ County**  
**Voluntary Agricultural District (VAD) Program**

**Owner Information**

Name(s): \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Email: \_\_\_\_\_

Phone (home): \_\_\_\_\_ Phone (cell): \_\_\_\_\_

**Property Information**

Owner(s): \_\_\_\_\_

Crop (list): \_\_\_\_\_  
 \_\_\_\_\_

Agricultural Products:  Livestock (list): \_\_\_\_\_  
 (check all that apply)  Horticultural  Timber  Aquaculture  
 Other (list): \_\_\_\_\_  
 \_\_\_\_\_

**Tax Parcel Information**

Parcel #	Street Address	Acres	FSA Farm & Tract

\*If more space is needed, attach an additional page.

**Application for Removal from  
\_\_\_\_\_ County  
Voluntary Agricultural District (VAD) Program**

**Conservation Agreement:**

Effective this this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_ I/we, owners of property listed above, wish to withdraw the parcel(s) listed from enrollment in the Voluntary Agricultural District as required by the VAD Ordinance. I/we hereby wish to revoke the Conservation Agreement filed on said parcel(s) on \_\_\_\_\_

By checking this box, I/we have read and agree with the above statement.

Reason for removal:

**I/we wish to remove the parcels from inclusion in the VAD Program:**

Owner Printed Name	Signature	Date

<b>(For Office Use Only)</b>	Date received: _____	Application Number: _____
Eligibility Reviewer:  _____	<input type="checkbox"/> Meets Ag Definition	<input type="checkbox"/> Managed for HEL
	<input type="checkbox"/> Conservation Agreement	<input type="checkbox"/> Meets Location Requirements
	Comments:	
Ag Advisory Board <input type="checkbox"/> Approved <input type="checkbox"/> Denied		Date: _____
Comments:		