



**AGRICULTURAL STRUCTURAL EXEMPTION
NOTIFICATION**

Town of Hardwick

PO Box 523, Hardwick, VT 05843

(802) 472-1686

zoning.administrator@hardwickvt.org

FOR ADMINISTRATIVE USE ONLY

Application Number: _____	Tax Map Number _____
Zoning District _____	
Date Notification Received ____/____/____	Recording Fee Paid \$ _15.00 ____

Please provide all of the information requested in this notification. Submit the completed notification and a \$15 recording fee (checks should be payable to the *Town of Hardwick*) to the Zoning Office.

Applicant(s):

Name(s): _____

Mailing Address: _____

Telephone(s) Home: _____ Work: _____ Cell: _____

E-Mail: _____

Landowner(s) (if different from applicant(s)):

Name(s): _____

Mailing Address: _____

Telephone(s) Home: _____ Work: _____ Cell: _____

E-Mail: _____

Physical Location of Property (911 address):

To qualify for an agricultural structural exemption, your farm structure must meet one the following criteria. Please check all that apply.

- Farm structure will be used in connection with the sale of \$2000 or more of agricultural products in a normal year;
- Farm structure will be used in connection with the raising, feeding, and management of at least the following number of adult animals on a farm that is no less than 4.0 contiguous acres in size; four equines, five cattle or American bison; fifteen swine; fifteen goats; fifteen sheep; fifteen cervids; fifty turkeys; fifty geese; one-hundred laying hens; 250 broilers, pheasant, Chukar partridge, or Coturnix quail; three camelids; four ratites (ostriches, rheas, and emus); thirty rabbits; one hundred ducks; or one-thousand pounds of cultured trout;
- Farm structure will be used by a farmer filing with the Internal Revenue Service a 1040(F) income tax statement in at least one of the past two years;
- Farm structure is on a farm with a business and farm management plan approved by the Secretary.

Only the Agency of Agriculture Food and Markets (AAFM) can provide an official State of Vermont agricultural determination. Please contact the AAFM or Kaitlin Hayes at Kaitlin.Hayes@vermont.gov or (802) 622-4122 for more information.

Property Acreage: _____

Setbacks from property lines: Front _____ (to center of road) Left Side _____
Right side _____ Rear _____
Rivers/Streams _____ Wetlands _____
Lakes _____

Please sketch a floor plan or diagram showing the dimensions of the proposed farm structure. (This should show the rooms on the inside of the building, including both the upstairs and the downstairs if there is more than one floor).

Please sketch a map indicating where it will be built on your property. (Please note that dwellings for human habitation are excluded from the agricultural structural exemption).

Signatures

The undersigned hereby certifies that the information submitted in this notification regarding the above property is true, accurate and complete and that I (we) have full authority to request approval for the proposed use of the property and any proposed structures. I (we) understand that any agricultural structural exemption will be issued in reliance of the above representations and will be automatically void if any are untrue or incorrect.

This notification is void if the development under this notification is not begun within two years of the date of approval.

Signature of Applicant(s) _____ Date _____

Signature of Landowner(s) _____ Date _____

Appeal from a decision or act of the Zoning Administrator must be made in writing to the Development Review Board, c/o the Town Clerk's Office at the address shown above, with the appropriate fee, within 15 days of the decision or act. Failure to appeal this decision will mean that all interested persons are bound by this decision and will foreclose these persons from contesting this decision either directly or indirectly in the future.

Please note that this is only a local permit and state permits may be needed for your project. Please contact the Permit Specialist at the VT Agency of Natural Resources at (802) 477-2241 or jeff.mcmahon@vermont.gov

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{ } Accepted	{ } Denied
Date _____	Signature _____
Remarks and/or Conditions: _____	
