

REQUEST FOR FINDING OF AGRICULTURAL EXEMPTION FROM ZONING

THERE IS NO FEE FOR THIS REQUEST; HOWEVER THE FOLLOWING IS REQUIRED TO PROCESS YOUR APPLICATION: **1) A BLUE PRINT** OF THE PROPOSED STRUCTURE **2) A SITE MAP*** SHOWING THE LOCATION OF PROPOSED STRUCTURE(S) ON THE PROPERTY, **3) THIS COMPLETED FORM ****

*THE SITE MAP MUST SHOW ALL ROADS, PROPERTY BOUNDARIES AND MEASUREMENTS FROM THE PROPERTY LINES TO THE STRUCTURE PROPOSED.

** A COPY OF YOUR MOST RECENT TAX RETURN MAY BE REQUIRED TO VERIFY AGRICULTURAL INCOME

- **E911 ADDRESS REQUIREMENTS:** IF THIS STRUCTURE IS TO BE CONSTRUCTED AT A SITE THAT DOES NOT CURRENTLY HAVE AN E911 ADDRESS ONE WILL BE ASSIGNED BY THE ZONING DEPARTMENT! MARKER STANDARDS ARE SET BY THE STATE OF IOWA SO THEY MUST BE ASSEMBLED BY THE COUNTY ENGINEERING DEPARTMENT. THE FEE INCLUDES PLACEMENT OF THE MARKER AT THE BUILDING SITE.
- **THERE IS A MANDATORY FEE OF \$75.00 FOR A NEW E911 MARKER AND \$50.00 FOR A REPLACEMENT MARKER**

FOR ZONING OFFICE USE ONLY:	E911 Marker Needed? <input type="checkbox"/> Yes <input type="checkbox"/> No	\$75.00 FEE
Address Assigned: _____	Date Paid: _____	Check/Receipt No: _____

DATE: _____	REQUEST NO: (Assigned by Zoning Office): _____
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APPLICANT - COMPLETE THE FOLLOWING INFORMATION:

Name _____ Property: Owner Tenant Other: _____

Mailing/Street Address: _____ City/State/Zip _____

Home Phone _____ Work/Cell Phone _____ Percentage of household farm income (reported on tax forms) _____

LOCATION OF PROPOSED STRUCTURE OR USE: PARCEL ID No.: _____

_____ 1/4 of the _____ 1/4 of Section # _____ of _____ Township

Size of this parcel: _____ acres Tax Class: _____ Zoning District: _____

Owner(s) of Record: _____

Property Address: _____

(E911 Location-Street Address/City/ State/ Zip -list name of Street/Avenue if no E911 has been assigned)

IF SOMEONE ELSE OTHER THAN OWNER LIVES AT THIS SITE PROVIDE THE FOLLOWING INFORMATION :

Occupant (name) _____ Explain their tie to your farming operation (i.e. hired hand/laborer) _____

How long have they worked on your farm? _____ Job Title/position _____ Hours/ week (worked, this farm) _____ AG wage(s) paid _____

1. Briefly describe your farming operation:

2. Indicate the type of crops/livestock that you currently produce/raise per year & #'s of each:

Agriculture Product	# Acres/Head	Agriculture Product	# Acres/Head	Agriculture Product	# Acres/Head
<input type="checkbox"/> Corn		<input type="checkbox"/> Fruits/Vegs		<input type="checkbox"/> Poultry	
<input type="checkbox"/> Soybeans		<input type="checkbox"/> Cattle		<input type="checkbox"/> Swine	
<input type="checkbox"/> Hay/Alfalfa		<input type="checkbox"/> Sheep		<input type="checkbox"/> Other:	

3. Describe the proposed structure and/or land USE for which you are seeking an agricultural exemption.

4. Provide a brief description as to how the proposed structure or land use is tied to your farming operation.

5. Please provide the following information pertaining to the proposed structure:

Type of Structure(s) (i.e. wood/steel) _____ Dimensions: _____
 Total Construction Value (estimate): \$ _____ Distance from *your* primary farmstead - in miles: _____

6. What is the distance by public road or private easement from the proposed structure or use to your farmstead (crop field, pasture, livestock confinement or feed lot, etc)?

7. If the proposed structure is not located on, or its use is not part of, your *primary farmstead operation*, explain how it is tied to your farmstead operation despite its remoteness from your farmstead.


8. If the proposed structure is for a DWELLING* please provide the following information pertaining to that structure:

Type of dwelling: New Replacement Primary dwelling Ag support housing
 Stick built Modular/Prefab Other _____
 Residency: Property Owner Hired Hand(greater than 50% declarable farm income) Tenant
 Other _____


**The Zoning Ordinance limits the number of ag support dwellings to 1 per farm operation, to be built no more than 300' from the location of the primary dwelling. Trailer homes must titled at the treasurer's office as taxable property. Additional rules may apply.*

APPLICANT SIGNATURE AND ATTEST:

I attest that to the best of my knowledge, the foregoing information is true and correct. I hereby give my consent for the Zoning Administrator to inspect the subject property and/or structures.

 _____
 Signature Date

I hereby acknowledge that I understand that the agricultural zoning exemption granted by the Code of Iowa applies ONLY to "land, farm houses, farm barns, farm buildings, or other buildings or structures which are PRIMARILY adapted, by reason of nature or area, for agricultural use of the land, and that, if granted, should the circumstances that allow approval of this particular exemption change, or be discovered so as to not qualify under the zoning exemption, such use or structures shall be subject to zoning regulations and penalties.

 _____
 Signature Date

APPROVAL FROM THE COUNTY ENGINEER IS REQUIRED PRIOR TO ZONING APPROVAL OR AG-EXEMPTION DETERMINATION, WHENEVER A NEW OR ALTERED PROPERTY ENTRANCE IS PLANNED OR A LIVING AREA IS EXPANDED, REMODELED OR FOR NEW HOME CONSTRUCTION

COUNTY ENGINEER/SECONDARY ROADS APPROVAL

Proposed construction complies with the following codes and/or ordinances: Well & Septic Regulations Access/Right of Way
 Proposed construction is clear of: County Tile Road Right of Way
 Additional notes or issues: _____

 Signature - County Engineer Date

ZONING DEPARTMENT REVIEW AND AUTHORIZATION:

Is property in a flood zone? Yes* No Within SFHA? Yes No
 Authorizations needed: Flood Plain Development Permit*... Not Needed Received* _____ (init)
 Septic Permit Not Needed Received _____ (init)
 Entrance Permit..... Not Needed Received _____ (init)

Additional notes or issues: _____

This agricultural exemption request has been reviewed for compliance and is Approved Denied AS PRESENTED.

 Signature - Zoning Director Date