

THE COMMONWEALTH OF MASSACHUSETTS

EXECUTIVE OFFICE OF ENERGY AND ENVIRONMENTAL AFFAIRS



Department of Agricultural Resources

251 Causeway Street, Suite 500, Boston, MA 02114
617-626-1700 fax: 617-626-1850 www.mass.gov/agr



Dear Applicant:

As requested, enclosed are information materials and an application for the Agricultural Preservation Restriction (APR) Program. In order for your application to be processed in a timely manner, please provide our office with the following:

1. Completed Application Form (pages 1 through 4).
2. U.S.G.S. Topographic Quadrangle Map showing an approximate outline of the farm.
3. U.S.D.A. Natural Resource Conservation Service (NRCS) map and farm plan.

These items # 2 and 3 above can be obtained by contacting your county NRCS office (see enclosed list). It is a free service. It may take several weeks to receive your information, so it is important that you contact the NRCS as soon as possible.

4. A plot plan showing the entire farm, including all areas under the same ownership. Indicate the land that is proposed for restriction, residences and their lots, and such other areas to be excluded from the restriction. A survey, assessor's map, aerial photograph or other suitable plan or sketch may be used provided it is reasonably to scale and large enough to delineate the above areas. The plan should be keyed into the categories shown in Questions 4 and 6.

A copy of pages 1 through 3 and the Enclosure E (pages 5 & 6) should be forwarded to your town's Conservation Commission. A copy of the completed application should also be made for your records.

If you have any questions, please do not hesitate to contact us at the Boston office. Staff members are:

Ron Hall @ (617) 626-1704), Michael Gold @ (617) 626-1712, Michele Padula @ (617) 626-1758, Chris Chisholm @ (617) 626-1788, Rick Chandler @ (413) -548-1905, and Barbara Hopson @ (413) 548-1906.

Thank you for your interest in the Agricultural Preservation Restriction Program.



**APPLICATION FORM
Agricultural Preservation Restriction (APR) Program
Chapter 132A, Section 11A**

PLEASE TYPE OR PRINT IN BALLPOINT PEN

Date: _____

1.

Municipality:	FOR OFFICE USE ONLY
County:	Date Received:
	Received by:

Applicants(s)

2.

Name:	
Address:	
Home Phone:	Other Phone:

Property Identification:

A: Location if different from above:

3.

Address
Phone:
Name of person in residence

B; Deed Reference:

Book:	Page:
Book:	Page:

C: Assessor's Records:

Map	Lot:
Map	Lot:

D: Owner of record if different from above:

Address:
Phone:
Name of person in residence:

E: Farm Name, Corporate or Business Name, if any. Explain:

4: Describe fully the agriculture carried out on the farm. Give acreage or quantities of the various crops grown, the number and kinds of livestock, forest products, specialty crops, greenhouse, etc.

5: What is the gross income generated by the farm? \$_____

6: Describe the land in the entire farm under ownership of the applicant(s) and that to be included in the restriction if they differ. Indicate total acreage for both.

Land Type or Usage	Total Acreage	Acreage Proposed for Restriction
A: Tilled Cropland		
B: Pasture		
C: Nursery		
D: Orchard		
E: Managed Woodland		
F: Non-managed Woodland		
G: Ponds, Wetlands		
H: Land occupied by farm buildings		
I: Land occupied by commercial buildings or residences		
TOTALS:		

7: Land owned by applicant, which is rented to others

Land Type/Usage	Acreage

8: Land rented from others by applicant.

Land Type/Usage	Acreage

9.

(Please circle Yes or No

Is your land under Farmland Assessment (Chapter 61A)? Forest Assessment (Chap. 61)?

YES

NO

YES

NO

- 10:** Degree of threat to the continuance of farming: Describe here any contingencies, personal concerns or other circumstances or long range plans which may have a bearing on the retention of your land and the farm in agriculture. Such fact as death, retirement, foreclosure, financial stress, and estate settlement should be explained, if pertinent, along with any situation, which would require that this application be handled expeditiously. Extra sheets may be attached and the explanation may be in narrative form signed by the applicant or his agent.

11. Agreement:

I (We) the undersigned, hereby agree not to sell the above-described land covered by this application for a period of 120 days from the date of receipt of the completed application by the Commissioner. During this period the property will be field inspected by the APR Staff and the provisional status given to the project by the Agricultural Lands Preservation Committee (ALPC).

Your Signature(s):	Date:

Notary:

**APPLICATION FORM
AGRICULTURAL PRESERVATION RESTRICTION (APR) PROGRAM**

ENCLOSURE “D”

CONFIDENTIAL STATEMENT

To be enclosed only with the commissioner’s copy of the application.

Note: Information provided on this statement shall be treated as confidential by the and shall be subject to disclosure only with the consent of the applicant until such time as the project is approved; provided that, if the municipality is to share in the cost of the project, the Committee reserves the right to disclose such information to the proper authorities of the municipality.

- 1.**
List any liens or encumbrances, including mortgages on the land covered by this application and the current money amount owed.

- 2.**
Applicants’ asking price for the Agricultural Preservation Restriction applied for. Please bear in mind that the Act requires that this value not exceed the difference between the fair market value of such land and its fair market value after it is restricted for agricultural purposes.

Asking price for the restriction: \$

Signature(s):

APPLICATION FORM
Agricultural Preservation Restriction (APR) Program

ENCLOSURE “E”

Information From Municipality

NOTE: This enclosure is to be filled out by the Conservation Commission of the municipality in which the land is located. The original should be forwarded to the Commissioner of Agricultural Resources, 251 Causeway Street, Boston, MA 02114. A copy should be sent to the applicant and a copy retained with the application by the town for its records.

1. Applicant(s):

Property Location:

Name:	Municipality
Address	County:
	Date

2. Contact Person: (Conservation Commission Member or other if no Commission)

Name:
Address:
Phone:

3. Zoning Information:

How is the property zoned?
How is abutting property zone

Enclose a copy or excerpt from the town zoning laws, which describe zones of subject and abutting property.

4. Describe how the preservation of this farm fits into the commission’s or the towns Open Space plan, Natural Resources inventory, zoning or other planning objectives, and indicate any comments, recommendations, or opinions of the Commissioner its members as to the value of this project to the State’s agriculture or to the town. (Use additional pages and attach if necessary)

