State Tax Form CL-2
Revised 6/2015

The Commonwealth of Massachusetts

_____
Name of City or Town

Office of the Board of Assessors

_____
Date

Notice of Action on Application for Forest-Agricultural or Horticultural-Recreational Land Classification

This notice informs you of the action taken by the Board of Assessors on your application of _____ , _____ for the valuation, assessment and taxation of the property described below as classified forest ☐ agricultural or horticultural ☐ recreational ☐ land under the provisions of General Laws Chapter 61 ☐ 61A ☐ 61B ☐ .

☐ **ALLOWED.** ☐ All ☐ part of your application was allowed by vote ☐ inaction ☐ of the assessors on _____, _____. This classification is effective January 1, _____ for the fiscal year beginning July 1, _____.

☐ **DISALLOWED**. ☐ All ☐ part of your application was disallowed by vote ☐ inaction ☐ of the assessors on _____, _____ for the following reason(s):

If all or part of your application was disallowed, you may appeal that decision by filing a notice with:

☐ The State Forester, by certified mail with a copy to the Board of Assessors, by December 1,_____ . (Forest Land)

☐ The Board of Assessors within 30 days of the date of this notice. (Agricultural or Horticultural /Recreational Land)

Location	Parcel Identification (Map-Block-Lot)	Deed Reference (Book & Page/Cert. No.)	Total Acres	Classified Acres	Disallowed Acres

_____

_____

_____

Board of Assessors of

_____

THIS FORM APPROVED BY THE COMMISSIONER OF REVENUE