

# Suffolk County Farmland Committee

## Farm Evaluation Form

*This form is to be completed by the landowner(s) **expressing interest in the Suffolk County Purchase of Development Rights Program**. The information obtained from this form will be used by the Suffolk County Farmland Committee (Committee) to evaluate the appropriateness of such request. The Committee will evaluate said request as part of the bi-annual review period process as described in Chapter 8 of the Suffolk County Administrative Local Laws. A recommendation by the Committee does not guarantee or imply that the Suffolk County Legislature will authorize Planning Steps or that the parcel(s) will be acquired. Submission of this form to the Committee grants the Committee and/or its designee, permission to enter and inspect the entire parcel(s).*

### PART I: PROPERTY DETAILS

Town: \_\_\_\_\_

Hamlet / Village: \_\_\_\_\_

Physical Location: \_\_\_\_\_

District: \_\_\_\_\_ Section: \_\_\_\_\_ Block: \_\_\_\_\_ Lot: \_\_\_\_\_

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The property is located within:

Zoning District(s) \_\_\_\_\_

Overlay District(s)  Yes  No If yes, which zone(s)? \_\_\_\_\_

Agricultural District  Yes  No

Pine Barrens  Yes  No If yes, which zone?  Central – Compatible Growth Area  Montauk  
 Central – Core  Oak Brush Plains  
 Eastern  South Setauket Woods

The property contains:

Woodlands  Yes  No If yes, please specify acreage: \_\_\_\_\_

Wetlands  Yes  No If yes, please specify acreage: \_\_\_\_\_

Slopes greater than 15%  Yes  No If yes, please specify acreage: \_\_\_\_\_

The property is improved with (Check all that apply. Include the number of structures and square footage per structure):

House  Barn  Shed  Greenhouse  Irrigation Pond  Other Details: \_\_\_\_\_

Total Acreage of Subject Parcel(s): \_\_\_\_\_ Total Acreage Offered for Acquisition: \_\_\_\_\_

Is there an exclusion/cutout area proposed for this property?  Yes  No If yes, please indicate the size and location of any proposed exclusions/cutouts on a copy of the survey.\*

\*Please note that this may require a supplemental form to be filled out in the future.

### PART II: AGRICULTURAL OPERATION DETAILS

Farm Name: \_\_\_\_\_ Website: \_\_\_\_\_

Current Crop(s): \_\_\_\_\_

Does the agricultural operation have a business plan?  Yes  No

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**PART II: AGRICULTURAL OPERATION DETAILS** (Continued)

Is the subject property farmed by someone other than the landowner (i.e., agricultural lessee)?  Yes  No

Have any development rights been sold previously?  Yes  No

To whom have the development rights been sold?  Town  County  Both  Other

Please explain: \_\_\_\_\_

Is the property in active agricultural production? \_\_\_\_\_

For how many years has this property been in active agricultural production? \_\_\_\_\_

Former Farm Name(s): \_\_\_\_\_ Former Crops(s): \_\_\_\_\_

Please provide any additional relevant information about the agricultural operation: \_\_\_\_\_

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**PART III: CONTACT INFORMATION****LANDOWNER**

Name: \_\_\_\_\_ E-mail: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Facsimile Number: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

**ATTORNEY** (if applicable)

Name: \_\_\_\_\_ E-mail: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Facsimile Number: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

**AGENT** (if applicable)

Name: \_\_\_\_\_ E-mail: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Facsimile Number: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

*If an agent, other than the landowner's attorney, will be representing the landowner, please submit a letter or other written permission signed by the landowner (1) confirming that the landowner is familiar with this application and (2) authorizing the submission of the application.*

**LESSEE** (if applicable)

Name: \_\_\_\_\_ E-mail: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Facsimile Number: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

*Please provide a copy of the current lease agreement.*

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**PART IV: LANDOWNER CERTIFICATION OF APPLICATION**

I, \_\_\_\_\_ (print full name), the undersigned, certify that I am the owner of the land identified in this application and that this application form including any attached documentation constitutes a true statement of facts to the best of my knowledge.

Landowner Signature \_\_\_\_\_

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**PART V: SUPPORTING DOCUMENTATION**

Please submit the following documentation in addition to this application:

- Survey (existing survey is sufficient), and if applicable, identified exclusions/cutouts on a copy of survey
- Written permission authorizing an agent to represent the application on behalf of the landowner (if applicable)
- Lease agreement (if applicable)
- Business plan (if applicable)

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**PART VI: APPLICATION SUBMISSION**

Please submit this application with supporting documentation to:

**Andrew Amakawa, Research Technician**  
**Suffolk County Division of Planning & Environment**  
**P.O. Box 6100, Hauppauge, NY 11788-0099**

**Questions?** Contact the Suffolk County Division of Planning & Environment at (631) 853-4863.