

Lancaster County Agricultural Preserve Board

Application for Subdivision and/or Residential Construction



Lancaster County Agricultural Preserve Board

150 N. Queen St.
Suite 325
Lancaster, PA 17603
(717) 299-8355

Filing Fees: \$50.00 Application Fee
\$250.00 Review Fee

For office use only

Grantee: _____ Acquisition No: _____
 Subject to Recorded APB Subdivision Guidelines Yes No Date Received: _____
 Comments: _____ Date: _____
 Decision: _____

A. Property Ownership and Details

1. Current Owner of Property: _____
2. Current Owner Mailing Address: _____
3. Property Address: _____
4. Municipality: _____
5. Tax Account Number(s): _____
6. Are you requesting a subdivision? Y N
(If Yes, continue to Second B. If No, continue to Section C)

B. Proposed Subdivision

1. Acres requesting to be subdivided: _____ Acreage of remaining tract: _____
2. Existing land use (cropland/woodland/wasteland): _____
3. Current township zoning: _____ Minimum lot size: _____
4. Will the proposed subdivision become a new parcel or a lot add-on? _____
 If a lot add-on, please provide adjoining parcel ID: _____
 Will the parcel be added to another preserved farm? N Y ➔ Preserved with APB LFT OTHER
5. Who is the intended owner of the proposed subdivided lot? _____
6. Are there any access issues regarding this proposed subdivision? Y N
 If yes, explain: _____
7. Will the proposed subdivision include a residence? Y N
(If Yes, continue to Section C. If No, continue to Section D)

C. Proposed Construction of a Residential Unit on Preserved Land

APB will evaluate the proposed location of a dwelling based on minimizing the loss of quality farmland and soil, clustering residential uses, ensuring access to farm fields, making use of public water and sewer lines when possible and minimizing property boundaries shared with agricultural areas.

1. Please confirm that your Deed of Agricultural Conservation Easement (ACE) allows for construction of a residential unit. Confirmed
 2. How many temporary or permanent residential units were existing at the time of preservation? _____
 3. Has a temporary or permanent residential unit been constructed on the preserved land since the time of preservation? Y N -If yes, has it since been subdivided? Y N
 4. Will area of residential unit, including driveway, yard, garage, septic, wellhead, etc. as well as the unit, be contained within two acres or less? Y N
 5. Who is the intended owner and/or resident of the residential unit? Do they contribute to the farm operation?
-

Complete Section D

D. Additional Information

1. Have you investigated any Clean and Green (Act 319) implications from this action? Y N  *If not, it is advisable to do so.*
 2. Have you contacted the Township regarding this action? Y N If yes, what input have you received?
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Please attach a sketch map indicating lot dimensions, total area, and configuration including driveway, residential unit, garage, septic tank and drainage field, and water wellhead and other improvements and/or the location and area of the proposed subdivision.

I/We, _____, do hereby verify that I/We have reviewed the application. I/We further verify that the application correctly and accurately depicts the condition of the land and that such statements are true and correct to the best of my/our knowledge, information, and belief. These statements are being given by me/us to induce official action on the part of the Lancaster County Agricultural Preserve Board, its agents, officers servants and employees. I/We understand that any false statements made herein are being made subject to the penalties of 18 PA.C.S. Section 4904 relating to unsworn falsification to authorities.

Landowner Signature

Date

Landowner Signature

Date

Conservation Plan Verification

A verification of your conservation plan is required along with the submission of this application. This form must be completed by a Certified Conservation Planner.

All questions must be answered; incomplete forms will not be accepted.

Plan prepared for: _____

Plan dated: _____ Prepared by: _____

Consulting firm: _____

Property account number(s) of land covered by the Plan: _____

This Conservation Plan describes land management practices which, when completely implemented, will improve and maintain the soil, water and related plant and animal resources of the land. It includes:

(check all that apply and fill-in applicable information)

- An implementation schedule
- An Operation & Maintenance Plan

The Plan includes a nutrient management component consisting of a statement of whether, or not a nutrient management plan is required under the Nutrient Management & Odor Management Act 38 (3 Pa.C.S. §§ 501 - 522). **(Circle Yes, No, or N/A)**

Yes, No, N/A - An Act 38 Nutrient Management Plan **is not** required; therefore, the Conservation Plan includes documentation of an existing manure management plan consisting of a description of the amounts and types of nutrients generated on the farmland tract and a description of any current and planned measures or procedures for containment, use, disposal or other disposition of the nutrients described.

Yes, No, N/A - A Nutrient Management Plan **is** required. Specify status by completing statement (a) or (b).

- a) The Nutrient Management Plan approved on _____ was prepared by _____ of _____
- b) The Nutrient Management Plan is being developed by _____ of _____ with an anticipated approval date of _____

Additionally, the Conservation Plan meets the following criteria: (Circle Yes, No, or N/A)

Yes, No, N/A It limits soil loss from sheet erosion to the soil loss tolerance (T) over the planned crop rotation.

Yes, No, N/A Pasture is identified and any treatment required is prescribed

Yes, No, N/A It identifies and prescribes treatment of all accelerated erosion from concentrated water flow

Yes, No, N/A It identifies and prescribes treatment of all animal heavy use areas

Yes, No, N/A It reflects the current agricultural production occurring on the restricted land.

Yes, No, N/A It is signed by the current owner/operator of the restricted land.

Yes, No, N/A It includes a statement indicating whether or not a Manure Management Plan exists for the restricted land.

Yes, No, N/A The Conservation Plan is implemented according to schedule.

I am a USDA/NRCS Certified Conservation Planner and do hereby affirm that the above statements are true and correct to the best of my knowledge, information, and belief. I understand that this form is utilized by the Agricultural Preserve Board to confirm that Conservation Plans meet the Lancaster County Agricultural Conservation Easement Program requirements. These statements are being given by me to induce official action on the part of the Lancaster County Agricultural Preserve Board, its agents, officers, servants, and employees. I understand that any false statements made herein are being made subject to the penalties of 18 PA.C.S. Section 4904 relating to unsworn falsification to authorities.

_____ (Planner name)
_____ (Planner signature) _____ (date)

I am the owner of the above referenced property. I understand that this form is utilized by the Agricultural Preserve Board to confirm that Conservation Plans meet the Lancaster County Agricultural Conservation Easement Program requirements. These statements are being given by me to induce official action on the part of the Lancaster County Agricultural Preserve Board, its agents, officers, servants, and employees. I understand that any false statements made herein are being made subject to the penalties of 18 PA.C.S. Section 4904 relating to unsworn falsification to authorities.

_____ (Landowner name)
_____ (Landowner signature) _____ (date)

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