

AGRICULTURAL DATA STATEMENT

Greene County Planning Agency General Municipal Law §239-M Referrals

Municipality:	Date:
	equiring municipal review for Special Use Permit, Site Plan Approval, or Us 500') of a farm operation located in an Agricultural District (Section 283-a o
Applicant	Owner, if different from Applicant
Name:	
Address:	
Phone #:	
Email:	Email:
1. Type of Application: O Site Plan Approval O Spec	cial Use Permit O Use Variance
2. Description of Project (purpose, acreages involved, etc.)	
3. Location of Project: Address:	
Tax Map Numbers:	
4. Is this parcel actively farmed? • YES • NO If y	es, principle farm type
5. Is this parcel within Agricultural District 124? • YES	O NO (Check with your local assessor)
6. List all farm operations within 500 feet of your parcel. (Chec	k with your local assessor)
Name:	Name:
Address:	
Tax Map Number(s)	
Agricultural District: O YES O NO	Agricultural District: Q YES Q NO
Parcel Actively Farmed: • YES • NO	Parcel Actively Farmed: • YES • NO
Name:	Name:
Address:	
Tax Map Number(s)	
Agricultural District: O YES O NO	Agricultural District: O YES O NO
Parcel Actively Farmed: • YES • NO	Parcel Actively Farmed: • YES • NO
Name:	Name:
Address:	
Tax Map Number(s)	
Agricultural District: O YES O NO	Agricultural District: O YES O NO
Parcel Actively Farmed: O YES O NO	Parcel Actively Farmed: O YES O NO
Attach a separate sheet if necessary.	

[•] Attach tax map(s) showing the site of the proposed project relative to the location of the farm operation(s) identified above.

^{*} To create a map use GIS Web Map/Greene County: https://gis.gcgovny.com/greenewebmap/