**AV-5** Web 8-11

# Application for Agriculture, Horticulture, and Forestry Present-Use Value Assessment

(G.S. 105-277.2 through G.S. 105-277.7)

County of Kuth	verford	, NC				Tax	Year 2	010
Full Name of Owner(s)  Chery  Mailing Address of Owner	un Ta	yler		THE CONTROL OF THE STATE OF THE	THE STATE OF THE S	12 - 5 - 3 1 4 - 1 1	1921379	# 3 = " = "     day v   1
Kutherfordt Home Telephone Number	•	Work Telepho	one Number	Ext.	Cell Phon	State N C e Numbe		139
Instructions Application Deadline: This a 60 days of a transfer of the lar	nd.							
Where to Submit Application and telephone numbers can Carolina Department of Rev Office Use Only:	be found online	application to the at: www.dorn	e county tax ass ac.com/download	essor where thi ds/CountyList.po	s property is loo df. DO NOT s	cated. C ubmit t	county tax asses his application	ssor addresses to the North
This application is for: (check all	that apply)						/	
AGRICULTURE (includes	AGRICULTURE (includes Aquaculture) HORTICULTURE FORESTRY							
Enter the Parcel Identificat	ion Number, a	creage break	down, and ac	reage total fo	r each tax pa	rcel inc	cluded in this	application:
PARCEL ID	OPEN LAND in Production	OPEN LAND not in Production	WOOD LAND	WASTE LAND	CRP LAND	HOME SITE	OTHER (Describe in Comments)	TOTAL ACRES
16-47687	8.98		40.53			1.0	3.10	53.61
Comments: 3.10 Pox	d							
Yes No Does the YES, list	e applicant own p the county or co	property in othe unties and parc	r counties that is cel identification i	also in presen number(s):	t-use value and	l is within	n 50 miles of th	is property? If
County:			Par	cel ID:				
County:		****	Par	cel ID:				
MOODTANTI								

#### IMPORTANT!

AGRICULTURE and HORTICULTURE applications with LESS than 20 acres of woodland generally need to complete PARTS 1, 2, and 4.

AGRICULTURE and HORTICULTURE applications with MORE than 20 acres of woodland generally need to complete PARTS 1, 2, 3, and 4.

FORESTRY applications need to complete PARTS 1, 3, and 4.

ADDITIONALLY, applications for CONTINUED USE of existing present-use value classification need to complete PART 5.

Please contact the Tax Assessor's office if you have questions about which parts should be completed.

Part 1. Ownership			
On what date did the appli	cant become the owner of the property? DATE	= April 16, 2010	
If owned less than four full	years on January 1, provide: Name of Previou		
How the Applicant is Rel	ated to the Previous Owner:		
S No Did	one of the applicants reside on the property on Ja	anuary 1 of the year for which this application is made?	
	S, provide name of resident:	/ 11	
Yes No Are a	any of the acres leased out to a farmer? If YES,		
Nam	e of farmer leasing the land:	Phone:	
Choose the legal	form of ownership from "a - e" below	v, and answer the questions, if any, for that o	wnership:
a. One Individu			
c. <u>Business Enr</u> partners of the	tity. (Circle one: Corporation, Limited Liability business entity and their farming activities:	y Company, Partnership) List all the direct shareholders, m	embers, or
Member	Farmin	g Activities:	
Member:	Farmin	g Activities:	
Member:	Farmin	g Activities:	
Member:	Farmin	g Activities:	
Yes No	you must attach a breakdown of those busines and you must describe those individuals' farmin	or partners either a business entity or trust (i.e. not an individ s entities or trusts until you reach the individual level of ownering activities.  Downership interest, are all of the individuals relatives of each	ership interest
	G.S. 105-277.2(5a) for the definition of relative	)	Tother? (See
d. Trust. List the	trustee(s), name of the trust, and all of the bene	ficiaries:	
Trustee(s):	1	Name of trust:	
Beneficiary:	Farmin	g Activities:	
Beneficiary:	Farmin	g Activities:	
Beneficiary:	Farmin	g Activities:	
Beneficiary:	Farmin	g Activities:	
Yes No	<ul> <li>Are any of the beneficiaries either a business e of those business entities or trusts until you rea individual's farming activities.</li> </ul>	ntity or trust (i.e. not an individual)? If YES, you must attach ach the individual level of ownership interest and you must d	a breakdown escribe those
Yes No	Once you have reached the individual level of relatives of the creator? (See G.S. 105-277.2)	ownership interest, are all of the beneficiaries either the true 5a) for the definition of relative.)	st's creator or
e. <u>Tenants in co</u>	ommon. List the tenants and their percentage of	ownership (round to the nearest 0.1%):	
Owner	%	Owner	%
Owner /	%	Owner	%
Yes No	Are any of the tenants either a business entity entity or trust. You must complete the busines labeling each copy with the name of the busines	or trust? <u>If YES, you must make a copy of this page for estentity section only or trust section only for each tenant, as entity or trust.</u>	ach business s appropriate.

The Tax Assessor may contact you for additional information after reviewing this application.

### Part 2. Agriculture and Horticulture

For the past three years and for each tax parcel within the farm unit, enter the agricultural or horticultural products actually produced on the land and the <u>gross income</u> from the sale of the products, including livestock, poultry, and aquatic species.

VERIFICATION.

If payments are received from any governmental soil conservation or land retirement program, indicate the acres and amount of income in the table below. Provide the name of the program in the Product column.

Do not include income received from the rental of the land. Income must be from the sale of the product.

	ONE YEAR AGO 20			TWO YEARS AGO 20			THREE YEARS AGO 20		
Parcel ID	Product	Acres	Income	Product	Acres	Income	Product	Acres	Income
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	Totals			Totals			Totals		
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	Totals	-		Totals	-		Totals		
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	Totals			Totals			Totals		
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	Totals			Totals			Totals		
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	Totals			Totals			Totals		

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If this application covers a horticultural tract used to grow **Christmas trees**, has a written management plan been prepared? If **YES**, attach a copy. If **NO**, attach a full explanation of your operation that contains at least the following: year each tract was planted, gross income from each tract, site management practices, number of trees per acre, and expected date of harvesting for each tract.

If this application covers an aquatic species farming operation, enter the total pounds produced for commercial sale annually for the last three years: Year 20 lbs, Year 20 lbs, Year 20 lbs

#### Part 3. Forestry

Attach a complete copy of your forest management plan. Indicate below who prepared the plan:

N.C. Division of Forest Resources

Consulting Forester

Owner

Other

Note: The property must be actively engaged in the commercial growing of trees under a sound management program as of January 1 of the year for which application is made.

### Key elements in a written plan for a sound forestland management program are listed below:

Management and Landowner Objectives Statement—Long range and short range objectives of owner(s) as appropriate.

Location--Include a map or aerial photograph that locates the property described and also delineates each stand referenced in the "Forest Stand(s) Description/Inventory and Stand Management Recommendations" (item 3 below).

Forest Stand(s) Description/Inventory and Stand Management Recommendations -- Include a detailed description of various stands within the 3. forestry unit. Each stand description should detail the acreage, species, age, size (tree diameter, basal area, heights), condition (quality and vigor), topography, soils and site index or productivity information. Stand-specific forest management practices needed to sustain productivity. health and vigor must be included with proposed timetable for implementation.

Regeneration-Harvest Methods and Dates--For each stand, establish a target timetable for harvest of crop trees, specifying the type of

regeneration-harvest (clear cut, seed tree, shelter wood, or selection regeneration systems as applicable)

Regeneration Technique--Should include a sound proposed regeneration plan for each stand when harvest of final crop trees is done. Specify intent to naturally regenerate or plant trees.

NOTE: Forest management plans can and should be updated as forest conditions significantly change (e.g. change in product class mix as the stand ages and grows, storm damage, insect or disease attack, timber harvest, thinning, wildfire). The county will audit plans periodically and, to remain eligible for use-value treatment, the plan must be implemented.

5 44 45						
Part 4. Affirmation						
AFFIRMATION OF APPLICANT – I (we) the undersigned declare under penalties of law that this application and any attachments hereto have been examined by me (us) and to the best of my (our) knowledge and belief are true and correct. In addition, I (we) fully understand that an ineligible transfer of the property or failure to keep the property actively engaged in commercial production under a sound management program will result in the loss of eligibility. I (we) fully understand that loss of eligibility will result in removal from the program and the immediate billing of deferred taxes.						
Signature of Owner (A Jenants of a tenancy in common must sign.)	Title	Date				
Signature of Owner (All tenants of a tenancy in common must sign.)	Title	Date				
Signature of Owner (All tenants of a tenancy in common must sign.)	Title	Date				
Part 5. Continued Use (Complete only if the eligibility under the Continued Use except	property is currently in Present-Use Value and you ar ion. See G.S. 105-277.2(b2)(1) for full details.)	e applying for immediate				
1. The property is currently in Present-Use Value.  2. I intend to continue the current use of the land under which it currently qualifies.  3. I understand I will be responsible for all deferred taxes due because of any disqualification.  4. I ACCEPT FULL LIABILITY FOR ANY EXISTING DEFERRED TAXES.  Note: If the property is currently in Present-Use Value and liability is not accepted, the full amount of the deferred taxes will typically be due in the name of the grantor immediately. Liability need not be accepted and no deferred taxes are due for qualifying transfers pursuant to G.S. 105-277.3(b) and (b1). For example, liability does not need to be accepted for qualifying transfers to relatives. However, any deferred taxes existing at the time of transfer will remain a lien on the property. Owners already receiving Present-Use Value on properties not included in this application may wish to review the alternative provisions of G.S. 105-277.3(b2)(2).						
Signature of Owner (All Jenants of a lenancy in common must sign.)	Title	Date				
Signature of Owner (All tenants of a tenancy in common must sign.)	Title	Date				
Signature of Owner (All tenants of a tenancy in common must sign.)	Title	Date				
OR OFFICE USE ONLY: APPROVED DENIED BY:	REASON FOR DENIAL:					



Steven W. Troxler Commissioner

## North Carolina Department of Agriculture and Consumer Services

N.C. Forest Service



Wib L. Owen Assistant Commissioner State Forester

North Carolina Forest Service District 12 1933 Mountain Island Hwy Mount Holly, NC 28120

December 14, 2016

Rutherford County Cheryl Taylor

Cheryl Taylor 1706 Grassy Knob Rd Rutherfordton, NC 28139

MAR 13 2017 PM 2:05

Dear Mrs. Taylor

We cannot accept payment for your Forest Management Plan until after the plan is complete. I am sorry for the delay in getting to your property but we have been very busy with all the wildfires this fall. We should be able to get out to your property sometime after the first of the year. After we complete your plan you will receive an invoice with instructions on payment.

Thank you for helping to keep North Carolina a beautiful place to live and work. Your interest in sound forest management is to be commended. If you have any questions or concerns, please feel free to contact County Ranger Doug Thompson or myself at 828-286-9201.

Sincerely;

James W. Bentley III Assistant County Ranger

Encloused: Check #1535

Cheryl Jean Taylor 1706 Grassy Knob Road Rutherfordton, NC 28139

UNITED COMMUNITY BANK

66-1167/531

1535

Nov 9,16

PAY TO THE ORDER OF \_\_ NC Forest

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**DOLLARS** 

Project # 11996

Cheryl Jean Laylor

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