

**TOWN OF BLACKSBURG  
AGRICULTURAL AND FORESTAL DISTRICT APPLICATION**

This is an application for consideration for property to enter or exit the Town's Agricultural and Forestal District. More information on the district can be found in the Town of Blacksburg Code, Chapter 3, which is available on the Town website at [www.blacksburg.gov](http://www.blacksburg.gov). This application and all accompanying information must be submitted in full before the application can be accepted by Town staff and incorporated into the Agricultural/Forestal District (AFD) public hearing process. Once the Planning and Building Department accepts the application, it will be referred to the Planning Commission and Town Council for consideration. Please contact the Planning and Building Department at (540) 961-1126 for application deadline or questions, or to schedule a pre-submittal meeting, or for meeting dates regarding these public hearings.

The following items **MUST** accompany this application for the Town of Blacksburg to accept this application for processing and review. Any items submitted cannot be larger than 11x17 in size:

- 1) Written, signed consent of the property owner.
- 2) One copy of a map clearly showing boundaries of property for AFD consideration. Map should show property lines, buildings, roads/drives, creeks or other natural features.
- 3) Vicinity map (may be included on the site plan) showing surrounding uses and location of the parcel in the Town.
- 4) Legal description of the property or the area of property to be added or withdrawn.
- 5) A list of adjacent property owners (including properties across a street) and their addresses.
- 6) Fee of \$150 for the review of the application. Please make your check or money order payable to the TOWN OF BLACKSBURG. Credit cards are also accepted (V/MC).

**SIGNATURE OF APPLICANT/CONTACT PERSON:**

\_\_\_\_\_ DATE: \_\_\_\_\_

By signing this application, I affirm that this application is complete and all required items are included.

**SIGNATURE OF OWNER:**

\_\_\_\_\_ DATE: \_\_\_\_\_

By signing this application, I affirm that I consent to this request, and that this application is complete and all required items are included

Property Owner Name(s): \_\_\_\_\_

Phone number: \_\_\_\_\_ Email: \_\_\_\_\_

Location or Address of Property for AFD Consideration:

\_\_\_\_\_

Tax Parcel Number(s): \_\_\_\_\_

Parcel ID(s): \_\_\_\_\_

Current Acreage in the district: \_\_\_\_\_

Acreage to be added to the district: \_\_\_\_\_

Acreage to be removed from the district: \_\_\_\_\_

Land uses by acreage: \_\_\_\_\_

Present Zoning District: \_\_\_\_\_

**Certification:**

By signing below, I hereby certify that the information given is correct, and that I consent to this request.

\_\_\_\_\_  
Property owner(s) Signature

\_\_\_\_\_  
Date

**PROPERTY OWNER(s)** (If property is held in an LLC or other corporation, names of all partners must be disclosed. All names of members or beneficiaries of a trust must also be disclosed. Signature blocks for multiple property owners may be obtained on separate sheets if needed)

NAME: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

\_\_\_\_\_

PHONE: \_\_\_\_\_ EMAIL: \_\_\_\_\_