



AGRICULTURAL LAND CONSERVATION APPLICATION

PLANNING FILING FEE: \$2,000
 DEPARTMENT OF PLANNING AND BUILDING SERVICES
 707 Nevada Street, Suite 5 · Susanville, CA 96130-3912
 (530) 251-8269 · (530) 251-8373 (fax)
 www.co.lassen.ca.us

Form must be typed or printed clearly in black or blue ink. All sections must be completed in full.

This application consists of one page; ATTACH COPY OF ASSESSOR'S MAP.

Application includes the filing of: (a) Soils Map
 (b) Lot Book Guarantee

FILE NO. _____

Check Lines Requested: ZONING DISTRICTS	
Agricultural Preserve "AP" <input type="checkbox"/>	
Exclusive Agricultural "EA" <input type="checkbox"/>	
Upland Conservation "UC" <input type="checkbox"/>	
Agricultural Forest "AF" <input type="checkbox"/>	

Property Owner/s	Applicant/Authorized Representative
Name:	Name:
Mailing Address:	Mailing Address:
City, ST, Zip:	City, ST, Zip:
Telephone: Fax:	Telephone: Fax:
Email:	Email: License #:

Project Address or Specific Location:			
Deed Reference: Book:	Page:	Year:	Doc#:
Zoning:		General Plan Designation:	
Parcel Size (acreage):		Section:	Township: Range:
Agricultural Land	Use	Acres	

Code Area Number(s):			
Assessor's Parcel Number(s):	- -	- -	- -
Assessed Value-Land			

SIGNATURE OF PROPERTY OWNER(S): I HEREBY ACKNOWLEDGE THAT: I have read this application and state that the information given is both true and correct to the best of my knowledge. I agree to comply with all County ordinances and State laws concerning this application.	*SIGNATURE OF APPLICANT/AUTHORIZED REPRESENTATIVE (Representative may sign application on behalf of the property owner only if Letter of Authorization from the owner/s is provided).
Date:	Date:
Date:	Date:

A REZONE APPLICATION IS REQUIRED ALONG WITH THIS APPLICATION