Form AV-5
(Rev. 12-05)

APPLICATION
for
PRESENT USE VALUE ASSESSMENT

COUNTY: _____ **TAX YEAR** _____

The Present Use Value program is governed by the North Carolina General Statutes. Before applying, please read the current version of Form AV-4 which is a compilation of the applicable Present Use Value statutes (available on the web at http://www.dor.state.nc.us/publications/property.html or at the Tax Assessor's office).

Full Name of Owner(s): _____

Mailing Address of Owner: _____

Phone Numbers: Home: (____)_____ Work: (____)_____ Cell: (____)_____

This application is for: (check all that apply)

[ ] **AGRICULTURE** [ ] **HORTICULTURE** [ ] **FORESTRY**

Enter the Parcel Identification Number, acreage breakdown, and acreage total for each tax parcel included in this application:

PARCEL ID	OPEN LAND in PRODUCTION	WOODLAND	WASTELAND	CRP PROGRAM	HOMESITE	OTHER (DESCRIBE BELOW)	TOTAL ACRES

Comments: _____

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 ACCEPTANCE OF LIABILITY FOR DEFERRED TAXES 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

1. On what date did the applicant become the owner of the property? **DATE:** _____

2. If the applicant is an individual or individuals, did one of the applicants reside on the property on January 1 of the year for which this application is made? **[ ] YES** **[ ] NO**

If yes, who? _____

3. Indicate any previous owners during the preceding four year period IF the applicant: (1) has owned the property for less than four years as of January 1 of the year for which this application is made, and (2) is not applying for ACCEPTANCE OF LIABILITY FOR DEFERRED TAXES (Part 5). Begin with the most recent owner and indicate any relationship (i.e. son, daughter, creator of trust, none, etc.) to the current applicant:

Previous Owner: _____ **Relationship to Applicant:** _____

Previous Owner: _____ **Relationship to Applicant:** _____

4. Indicate whether the applicant's form of ownership is one or more of the following:

[ ] Individual(s) **[ ] Business Entity** **[ ] Trust**

5. If the applicant is a business entity, indicate the type of business entity:

[ ] Limited Liability Company **[ ] General Partnership**

[ ] Corporation **[ ] Limited Partnership**

6. If the applicant is a business entity (corporation, general partnership, limited partnership, or limited liability company), **state the principal business of the business entity:**_____

7. If the applicant is a business entity, list the names, percentage of ownership, and each person's participation in the farming and/or forestry related activities of the business entity:

NAME	% OF OWNERSHIP	LIST YOUR FARMING AND/OR FORESTRY RELATED ACTIVITIES

8. If the applicant is a business entity, does the business entity lease the property out to another party for management and/or farming purposes? **[ ] YES** **[ ] NO**

If YES, are all members of the business entity related to each other? **[ ] YES** **[ ] NO**
(see Form AV-4 or G.S. 105-277.2(5a) for the definition of relative)

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 gross income from the sale of the products, including livestock and poultry. **INCOME INFORMATION IS SUBJECT TO 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
	Totals			Totals			Totals		
	Totals			Totals			Totals		
	Totals			Totals			Totals		
	Totals			Totals			Totals		
	Totals			Totals			Totals		

If this application covers a horticultural tract used to grow **Christmas trees**, state whether or not a written management plan has been prepared: ☐ **YES** ☐ **NO** 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.

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 <u>sound forestland management program</u> are listed below:

1. Management and Landowner Objectives Statement—Long range and short range objectives of owner(s) as appropriate.
2. 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).
3. Forest Stand(s) Description/Inventory and Stand Management Recommendations -- Include a detailed description of various stands within the 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.
4. Regeneration-Harvest Methods and Dates--For each stand, establish a target timetable for harvest of crop trees, specifying the type of regeneration-harvest (clearcut, seed-tree, shelterwood, or selection regeneration systems as applicable).
5. 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.

PART 4 AFFIRMATION

AFFIRMATION: 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(s) of Owner(s): _____ **Title:** _____ **Date:** _____

_____ **Title:** _____ **Date:** _____

PART 5 ACCEPTANCE OF LIABILITY FOR DEFERRED TAXES (<u>Complete only if accepting liability for existing deferred taxes!</u> See G.S. 105-277.3(b2)(1) for full details.)

I certify:
1. **The property is currently in Present Use Value and the deferred taxes have not been paid.**
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 THE 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 be due in the name of the grantor immediately, except that liability need not be accepted and no deferred taxes are due for qualifying transfers pursuant to G.S. 105-277.3(b) and (b1). Liability does not need to be accepted for qualifying transfers to relatives. Property owners already receiving Present Use Value on properties not included in this application may also wish to review the provisions of G.S. 105-277.3(b2)(2).

Signature(s) of Owner(s): _____ **Title:** _____ **Date:** _____

_____ **Title:** _____ **Date:** _____

THIS SPACE FOR OFFICE USE ONLY

[ ] APPROVED [ ] DENIED BY: _____ REASON FOR DENIAL: _____