Make ODA - Ag. Adm. Form 11
Rev. - 12/2006

RETURN BOTH COPIES TO AUDITOR

New Application _____
Renewal Application ✓

APPLICATION FOR PLACEMENT OF FARMLAND IN AN AGRICULTURAL DISTRICT
(O.R.C. Section 929.02)

(See reverse side for General Information regarding this Application)

INSTRUCTIONS FOR COMPLETING APPLICATION

Print or type all entries.

- List description of land as shown on the most recent tax statement or statements. Show total number of acres.
- Describe location of property by roads, etc., and taxing district where located.
- State whether any portion of land lies within a municipal corporation.
- **Note:** See "Where to File" on reverse side to be sure that a copy of this Application is also filed with the Clerk of the municipal legislative body as well as the County Auditor.
- A renewal application must be submitted after the first Monday in January and prior to the first Monday in March of the year in which the agricultural district terminates for the land to be continued in this program.
- If the acreage totals 10 acres or more, do not complete Part D.
- If the acreage totals less than 10 acres, complete either D (1) or (2).
- Do not complete the bottom portion. This space to be completed by the County Auditor and/or Clerk of the municipal legislative body.

A. Owner's Name: Marilyn Demaline Trustees

Owner's Address: PO Box 299 Avon, OH 44011

Description of Land as Shown on Property Tax Statement: _____

Location of Property: Long Rd, Avon, OH (Street or Road), _____ (County)

TAX DISTRICT(S)	PARCEL NUMBER(S)	# of Acres
10	04-00-012-101-082	54.546
10	04-00-012-101-078	0.0868
	Total Number of Acres:	54.63

B. Does any of the land lie within a municipal corporation limit or subject to pending annexation?
Yes ✓ No _____
If YES, REMEMBER a copy of this application must be submitted to the Clerk of the municipal legislative body.

C. Is the land presently being taxed at its current agricultural use valuation under Section 5713.31 of the Ohio Revised Code?
Yes ✓ No _____

1. If "NO" complete the following showing how the land was used the past three years:

	LAST YEAR Acres	TWO YEARS AGO Acres	THREE YEARS AGO Acres
Cropland			
Permanent Pasture used for animal husbandry			
Woodland devoted to commercial timber and nursery stock	54.63	54.63	54.63
Land Retirement or Conservation Program pursuant to an agreement with a federal agency			
Building areas devoted to agricultural production			
Roads, building areas, and all other areas not used for agricultural production			
Total Acres	54.63	54.63	54.63

D. Does the land for which the application is being made total 10 acres or more devoted exclusively to agricultural production or devoted to and qualified for payments or other compensation under a land retirement or conservation program under an agreement with an agency of the federal government?
Yes ✓ No _____
If "No," complete the following:

1. Attach evidence of the gross income for each of the past 3 years, if the average yearly income from agricultural production was at least twenty-five hundred ($2,500.00) dollars or more, OR
2. If the owner anticipates that the land will produce an annual gross income of twenty-five hundred ($2,500.00) dollars or more, evidence must be attached showing the anticipated gross income.

Authorization and Declaration

By signing this application I authorize the county auditor or his duly appointed agent to inspect the property described above to verify the accuracy of this application. I declare this application (including accompanying exhibits) has been examined by me and to the best of my knowledge and belief is a true, accurate and correct application. I understand that land removed from this program before the 5-year enrollment period is subject to penalty, in accordance with Section 929.02(D) of the Ohio Revised Code.

Signature of Owner: Marilyn Demaline Date: 2/5/18

DO NOT COMPLETE FOR OFFICIAL USE ONLY

PENDING CITY APPROVAL

Action of County Auditor **CAUV Application No.** _____

Application Approved: _____ Rejected: _____ *

Date Application Filed with County Auditor: _____ Date Filed (if required) with Clerk of Municipal Corporation: _____

County Auditor's Signature: _____ Date: _____

Date Decision Mailed to Applicant: _____ Certified Mail No.: _____

Action of Legislative Body of Municipal Corporation

Application Approved: _____ Approved with Modifications: _____* Rejected: _____*

Date Application Filed with Clerk: 2/6/18 Date of Public Hearing: _____ Date of Legislative Action: _____

Clerk's Signature: _____ Date: _____

Date Decision Mailed to Applicant: _____ Certified Mail No.: _____

*** IF MODIFIED OR REJECTED, ATTACH SPECIFIC REASONS FOR MODIFICATION OR REJECTION.**