

# Suffolk County Farmland Committee

## Farm Evaluation Form

*This form is to be completed by the landowner(s) **expressing interest in the Suffolk County Purchase of Development Rights Program**. The information obtained from this form will be used by the Suffolk County Farmland Committee (Committee) to evaluate the appropriateness of such request. The Committee will evaluate said request, as described below, at the subsequent Committee meeting and approve or disapprove the parcel(s) for recommendation to the Suffolk County Legislature to commence the Planning Steps process. Approval by the Committee does not guarantee or imply that the Suffolk County Legislature will authorize Planning Steps or that the parcel(s) will be acquired. Submission of this form to the Committee grants the Committee, and/or its designee, permission to enter and inspect the entire parcel(s).*

**PART I: PROPERTY DETAILS**

FOR INTERNAL USE ONLY  
SCFC Meeting Date: \_\_\_\_\_

Town: \_\_\_\_\_

Hamlet / Village: \_\_\_\_\_

Physical Location: \_\_\_\_\_

District: \_\_\_\_\_ Section: \_\_\_\_\_ Block: \_\_\_\_\_ Lot: \_\_\_\_\_

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The property is located within:

Zoning District(s) \_\_\_\_\_

Overlay District(s)  Yes  No If yes, which zone(s)? \_\_\_\_\_

Agricultural District  Yes  No

Pine Barrens  Yes  No If yes, which zone?  Central – Compatible Growth Area  Montauk  
 Central – Core  Oak Brush Plains  
 Eastern  South Setauket Woods

The property contains:

Woodlands  Yes  No If yes, please specify acreage: \_\_\_\_\_

Wetlands  Yes  No If yes, please specify acreage: \_\_\_\_\_

Slopes greater than 15%  Yes  No If yes, please specify acreage: \_\_\_\_\_

The property is improved with (Check all that apply. Include the number of structures and square footage per structure):

House  Barn  Shed  Greenhouse  Irrigation Pond  Other Details: \_\_\_\_\_

Total Acreage of Subject Parcel(s): \_\_\_\_\_ Total Acreage Offered for Acquisition: \_\_\_\_\_

**Important:** Please be sure to indicate the size and location of any proposed exclusions on the survey.

**PART II: AGRICULTURAL OPERATION DETAILS**

Farm Name: \_\_\_\_\_ Website: \_\_\_\_\_

Current Crop(s): \_\_\_\_\_

Does the agricultural operation have a business plan?  Yes  No

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**PART II: AGRICULTURAL OPERATION DETAILS** (Continued)

Is the subject property farmed by someone other than the landowner (i.e., agricultural lessee)?  Yes  No

Have any development rights been sold previously?  Yes  No

To whom have the development rights been sold?  Town  County  Both  Other

Please explain: \_\_\_\_\_

For how many years has this property been in active agricultural production? \_\_\_\_\_

Former Farm Name(s): \_\_\_\_\_ Former Crops(s): \_\_\_\_\_

Please provide any additional relevant information about the agricultural operation: \_\_\_\_\_

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**PART III: CONTACT INFORMATION****LANDOWNER**

Name: \_\_\_\_\_ E-mail: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Facsimile Number: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

**ATTORNEY** (if applicable)

Name: \_\_\_\_\_ E-mail: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Facsimile Number: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

**AGENT** (if applicable)

Name: \_\_\_\_\_ E-mail: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Facsimile Number: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

*If an agent, other than the landowner's attorney, will be representing the landowner, please submit a letter or other written permission signed by the landowner (1) confirming that the landowner is familiar with this application and (2) authorizing the submission of the application.*

**LESSEE** (if applicable)

Name: \_\_\_\_\_ E-mail: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Facsimile Number: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

*Please provide a copy of the current lease agreement.*

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**PART IV: SUPPORTING DOCUMENTATION**

Please submit the following documentation in addition to this application:

- Survey (existing survey is sufficient)
  - Written permission authorizing an agent to represent the application on behalf of the landowner (if applicable)
  - Lease agreement (if applicable)
  - Business plan (if applicable)
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**PART V: APPLICATION SUBMISSION**

Please provide notice at least **ten (10) business days** prior to any Committee meeting **with supporting documentation** to:

**Thomas A. Isles, Director**  
**Suffolk County Planning Department**  
**P.O. Box 6100**  
**Hauppauge, NY 11788-0099**

**Note: You may fax this sheet to (631) 853-4044, in order to start the review process. Please send all supporting documentation within one (1) business day of sending the fax.**

**Questions?** Contact the Suffolk County Planning Department at (631) 853-5191.