

FOR OFFICIAL USE ONLY

Agricultural Us	e	Agricultural	Reserve	Forest Reserve
APPROVED		ROVED	DENI	ED
			INSTRUMEN	T NO.:
DATE:		 -	Clearfield (County Chief Assessor
Service Requested:	New Enrollm	ient		
	_ Discontinue	preferential tax		ram. (Note: this option may
	CLEAN	AND GREEN	VALUATION	APPLICATION
Owner:				
(Last)		(F	irst)	(Middle Initial)
Owner:				
(Last)		(F	irst)	(Middle Initial)
Mailing Address:	<u>, </u>			
Parcel I.D.	-			Acreage:
District	Мар	Sub-map	Parcel	·
Parcel I.D.			Parcel	Acreage:
District	iviap	oun-map	Failel	
Parcel I.D	 	Sub-map	Parcel	Acreage:
Parcel I.D.	_			Acreage:
District	Map	Sub-map	Parcel	



1.	The land for which application is being made is owned by:									
	Individual									
	Partnership									
	Corporation									
	Institution									
	Cooperative									
	Other									
	(explain):									
2.	Is this land currently assessed under Act 515: (16 P.S. Section 11941 et sec subject to a covenant for preservation of "open space" land?)									
3.	Is the land in this application leased for minerals? (Including Oil & Gas)	Yes	No							
4.	Is there a cellular communication tower located on this property?	Yes _	No							
5.	Are there Tier I Alternative Energy Sources located on this property? ("A Tier I alternative Energy Source, as defined at (73 P.S. § 1648.2) Energy derived from: solar photovoltaic energy; wind power; low-impact hydropower; geothermal energy; biologically derived methane gas; fuel cells; biomass energy; coal mine methane.	Yes _	No							
	If so, is the majority of the energy annually generated utilized on the tract?	Yes	No							
6.	Do you or anyone else conduct non-agricultural commercial activities on this land? If yes, please describe this activity.	Yes _	No							
7.	This property is located within	School	District,							
	, Clearfield County.									
	(City, Borough, Township)									



		categories do you qualify?		
Agricult	tural Use	Agricultural Reserve	Forest Reserve	
(Note:	You may use more t	han one land use category.)		
	is devoted to and m	Land which is used for the purpose of proceets the requirements and qualifications for servation program under an agreement v	or payments or other compensation	
		e – Noncommercial open space lands used or natural beauty and open to the public fory basis.		
		nd, ten acres or more, stocked by forest tr other wood products.	ees of any size and capable of	
		ories may include any land devoted to the ystem, if a majority of the energy annually		
9. Is th	here farmstead land	located on this property?	Yes	No
		y curtilage and land situated under a residence, including a residential garage or		5
	es ineligible land ex l on this application	ist as part of the larger contiguous t	tract of eligibleYes	No
If ye	es, please list below	any ineligible land and the use of t	he land which is causing it to b	e ineligible.
wor!		olications, has the land represented devoted to agricultural use for the		No
12 IN '	THE EVENT OF A	CHANGE IN OWNERSHIP OF A	A PORTION OF THE LAND (OR ANY TYP

OF DIVISION OR CONVEYANE OF THE LAND, THE APPLICANT HEREBY ACKNOWLEDGES THAT IF HIS APPLICATION IS APPROVED FOR PREFERENTIAL ASSESSMENT, ROLLBACK

DIVISION OR CONVEYANCE OF THE LAND.

TAXES UNDER SECTION 5.1 OF THE ACT MAY BE DUE FOR A CHANGE IN USE OF THE LAND, A CHANGE IN OWNERSHIP OF ANY PORTION OF THE LAND, OR ANY TYPE OF Page | 3



The applicant for preferential assessment hereby agrees, if his application is approved for preferential assessment, to submit thirty days' notice to the county assessor of a proposed change in use of land, a split-off portion of the land, or a conveyance of the land.

The undersigned declares that this application, including all accompanying schedules and statements, has been examined by him/her/them and to the best of his/her/their knowledge, information, and belief is true and correct and makes this representation subject to the penalties of 18 PA.C.S.A. Section 4904 (relating to unsworn falsifications to authorities).

Date	Signature of Owner
Date	Signature of Owner
COMMONWEALTH OF PENNSYLVA	NIA: : SS.
COUNTY OF	:
On this day of	, 20, before me, the undersigned
authority, personally appeared	
known to me or satisfactorily proven to be	e the person(s) whose name(s) is/are subscribed to the within
instrument, and acknowledged that he/she	/they executed the same for the purposes therein contained.
IN WITNESS WHEREOF, I have hereum	to set my hand and official seal.
My Commission Expires:	Notary Public