Notice of Intent - Agricultural Structure * As required by Vermont Accepted Agricultural Practices Rules	

Town of Thetford, Vermont			
Notice of Ir	tent - Agricultural Stru	cture	
Parcel ID .	Tax M	Map No.	
Applicant:			
Mailing Address:			
Preferred daytime contact: □ phone			
□ email			
Street Address of Property:		Lot Size:	
Property Owner: (if not Applicant)			
Mailing Address:			—_
To qualify for an agricutlural structural exe	nption, your farm structure must m	neet at least <u>one</u> of the following	ng*:
☐ Is used in connection with the sale of \$1	00 or more of agricultural products in a norma	al year	
☐ Is used in the connection with the raising, feeding, and management of at least the following number of adult number of adult animals: four equines; five cattle or American Bison; fifteen swine; fifteen goats; fifteen sheep; fifteen fallow deer;			
fifteen red deer; fifty turkeys; fifty geese; one-hundred laying hens; two-hundred and fifty broiler, pheasant, Chukar partridge, or Coturnix quail; three camelids; four ratites (ostriches, rheas, and emus); thirty rabbits; one hundred ducks; or			
partridge, or Coturnix quail; three camel one-thousand pounds of cultured trout.	s; four ratites (ostriches, rheas, and emus); un	irty rabbits; one hundred ducks; or	
	Revenue Service a 1040(f) income statement	•	
☐ Is on a farm with a business and farm ma	agement plan approved by the Commissioner.	: 	
Type of Structure:			
Size and Dimensions of Structure:			
Describe how the proposed structure meets the criteria above for an exemption:			
Closest distance between new structure/addition	and the following property lines (Plea	ase attach sketch showing this):	
front/street:ft. back:	ft. right:	ft. left:ft.	
Is this property located in a Flood Hazard Ar	a? Is this property located	d near a surface water?	
□ Yes □ No	□ Yes □ No		
If this structure does not meet the required setba	s a written response of waiver will be require	ed from the Secretary of Agriculture.	
	tification of Owner/Applicant		_
OWNER/APPLICANT: The undersigned hereby cert accurate and complete. If the structure no longer meets to			true,
Owner's signature		Date	
Applicant's signature		Date	
Please Note that State Permits may be req	red for your project. Please contact the Perm	nit Specialist at (802) 476-0195.	