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Assessment No

APPLICATION TO HAVE LAND CATEGORISED AS FARMLAND Under Section 514 and 515 of the Local Government Act, 1993

AND

STATUTORY DECLARATION

Applicant:
(name in full)

Of:
(postal address)

COUNCIL MAY NEED TO VERIFY SOME DETAILS WITH YOUR ACCOUNTANT

Is there a residence on the property? YES/NO

Who resides in residence?

Is the property leased? YES/NO

Who is responsible for payment of rates?

Area of property: Area used for farming activity:

INDICATED ON ATTACHED PAGES TYPES OF
BUSINESS OR INDUSTRIES CARRIED OUT ON PROPERTY:

Do you lodge a tax return for the business or industry? YES/NO

Do you lodge a stock return? YES/NO

Do you employ assistance in the farming business or industry? YES/NO

Do you keep records? YES/NO

Is there a written lease/agistment agreement? YES/NO

Who is responsible for maintenance of the stock?

Is the property run in conjunction with another property?
(If yes, please supply details)

YES/NO

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.....
.....

Location of other property:

Owner of other property:

Farming activity carried out on that property:

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.....

What stock or crops are on that property:

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application continues over page

PRIVACY STATEMENT

The personal information that Council is collecting from you is personal information for the purposes of the Privacy and Personal Information Protection Act 1998. The intended recipients of the personal information are officers within Council; data service providers engaged by Council from time to time; any other agent of Council.

The supply of the information is voluntary. If you cannot provide or do not wish to provide the information sought, Council /will be unable to process your application.

You may make application for access or amendment to information held by Council. You may also make a request that Council suppresses your personal information from a public register. Council will consider any such application in accordance with the Act. Council is the agency that holds the information.

Enquiries concerning this matter can be addressed to the Public/Privacy Officer.

Grazing of Cattle:	Calves	Heifers to 12 Months	Heifers 12 to 24 Months	Breeding Cows	Bulls	Steers	Bullocks	Details of Registered Stud Cattle	
Current Numbers									
Minimum Number Last 12 Months									
Maximum Number Last 12 Months									
Dairying:	Milkers:		Dry Cattle:		Heifers:				
Grazing of Sheep:	Lambs:		Ewes:		Whethers:		Rams:		
	Is Wool Produced: Yes/No								
Grazing of Goats:	Stock Numbers:		Breeders:		Kids:				
	Is Wool Produced: Yes/No								
Grazing of Deer:	Stock Numbers:		Breeders:		Others:				
Grazing of Horses:	Foals:		Yearlings:		Mares:		Stallions:	Geldings	
	What is the Purpose of the Horses?:								
Pig Farming:	Breed/Type of Stock:				Number of Piglets:		Sows:	Hogs	
Poultry Farming:	Breed/Type of Birds:				Number of Stock:				
	What is the Purpose of the Birds?:								

Forestry:	Type of Trees:	Number of Trees:	Sale Details:
Viticulture:	Type of Vine(s):	Area Planted:	Area Producing:
Orcharding:	Type of Trees:	Number of Trees:	Production Figures:
Beekeeping:	Number of Hives:	Production Figures:	
Horticulture/ Vegetable Growing:	Type of Plants:	Area Under Cultivation:	Production Figures:
	Where are crops marketed?		
Growing of Crops:	Type of Crops:	Area Under Cultivation:	Crop Sale Details:
	Please indicate if crops used on property only <input type="checkbox"/>		

Any other relevant information which may assist in this application:

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Please be advised that Council officers may wish to inspect your property and if necessary will arrange an appointment with you.

STATUTORY DECLARATION
OATHS ACT, 1900, NSW, EIGHTH SCHEDULE

I / We
(name of declarant)

do solemnly and sincerely declare that: -

- a) I / we are the owner/occupier of the property concerned in this application.
- b) the answers to the questionnaire are true in every detail.

AND I / we make this solemn declaration conscientiously believing to same to be true and by virtue of the provisions of the Oaths Act, 1900.

Declared at on
(place) (date)

.....
(signature of declarant)

in the presence of an authorised witness, who states:

I,
(name of authorised witness)

a
(qualification of authorised witness)

certify the following matters concerning the making of this statutory declaration by the person who made it:

(* please cross out any text that does not apply)

- 1. *I saw the face of the person **OR** *I did not see the face of the person because the person was wearing a face covering, but I am satisfied that the person had a special justification for not removing the cover, and
- 2. *I have known the person for **OR** *I have not known the person for at least 12 months, but I have confirmed the person's identity using an identification document and the document I relied on was:

.....
(describe identification document relied on)

.....
(signature of authorised witness)

.....
(date)