



# AGRICULTURAL STRUCTURE (ACC 8-5-3-4)

An Agricultural Structure requires the issuance of a **Zoning Certificate**

### SITE INFORMATION:

Section: \_\_\_\_\_ Township: \_\_\_\_\_ Range: \_\_\_\_\_ Total Acres: \_\_\_\_\_  
 Subdivision Name: \_\_\_\_\_ Lot: \_\_\_\_\_ Block: \_\_\_\_\_  
 Site Address: \_\_\_\_\_ City: \_\_\_\_\_  
 Tax Parcel Number(s): \_\_\_\_\_  
 Zoning District: \_\_\_\_\_ Overlay District(s): \_\_\_\_\_

### GENERAL INFORMATION:

Is the proposed structure located on a Farm: YES  NO   
*FARM: A property in agricultural use that is five (5) acres in size or greater.*  
 Does the property currently have Agricultural Exemption: YES  NO   
 Is the property a minimum of five (5) acres in size: YES  NO   
 Total square footage of proposed structure: \_\_\_\_\_  
 Structure Enclosed: YES  NO   
 I certify that the proposed structure is for agricultural use **only**. *Applicant initials: \_\_\_\_\_*  
**AGRICULTURAL STRUCTURE:** A structure on a "farm", as herein defined, excluding any dwelling or any structure that shelters any personal items not directly needed for agricultural uses.

### SITE PLAN: (Include the following, drawn to scale/dimensioned):

<input type="checkbox"/>	Existing easements
<input type="checkbox"/>	Property lines
<input type="checkbox"/>	Existing structures
<input type="checkbox"/>	Proposed structures
<input type="checkbox"/>	Septic & Well locations
<input type="checkbox"/>	Front Setback
<input type="checkbox"/>	Rear Setback
<input type="checkbox"/>	Interior Side Setback

### APPLICANT/AGENT: (Please print)

Name: \_\_\_\_\_  
 Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Telephone: \_\_\_\_\_ Email: \_\_\_\_\_  
 I certify this information is correct to the best of my knowledge. \_\_\_\_\_  
 Signature (Applicant)

### PROPERTY OWNER(S): (Please print)

Name: \_\_\_\_\_  
 Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Telephone: \_\_\_\_\_ Email: \_\_\_\_\_  
 I certify this information is correct, and allow Development Services staff to enter the property for related site inspections. I agree to indemnify, defend and hold Ada County and its employees harmless from any claim or liability resulting from any dispute as to the statements contained in this application or as to the ownership of the property, which is the subject of the application. **I agree that the Agricultural Structure will be exclusively for agricultural uses.**  
 Signature: Owner(s) of Record \_\_\_\_\_ Date \_\_\_\_\_  
 Signature: Owner(s) of Record \_\_\_\_\_ Date \_\_\_\_\_

### OFFICE USE ONLY:

RECEIVED BY: _____	DATE: _____	DATE STAMPED: <input type="checkbox"/>
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