

**Washington County Agricultural District Intake Form**

Date of First Contact: \_\_\_\_\_

Name of Interested Party: \_\_\_\_\_

Total Acreage of Parcel: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Phone Number: \_\_\_\_\_

E-mail Address:

Map: \_\_\_\_\_ Grid: \_\_\_\_\_ Parcel: \_\_\_\_\_

General Farming Operation: \_\_\_\_\_

Owner operated: \_\_\_\_\_ Leased: \_\_\_\_\_

Names on Deed: \_\_\_\_\_

Soils: \_\_\_\_\_