

**AGRICULTURAL CLEARING PERMIT APPLICATION
PURSUANT TO THE COLLIER COUNTY LAND DEVELOPMENT CODE**

APPLICANT CONTACT INFORMATION

Name of Owner: _____

Name of Applicant if different than owner: _____

Address: _____ City: _____ State: _____ ZIP: _____

Telephone: _____ Cell: _____ Fax: _____

E-Mail Address: _____

Name of Agent if different than owner: _____

Firm: _____

Address: _____ City: _____ State: _____ ZIP: _____

Telephone: _____ Cell: _____ Fax: _____

E-Mail Address: _____

PROPERTY INFORMATION

Legal Description of Property/Folio: _____

Street Address of Property: _____

Zoning District, including Zoning Overlays: _____

Property Acreage: _____ Proposed Acreage to be Cleared: _____

Proposed Agricultural Use: _____

Associated building permit: _____

Please answer the following. Where permits or exemptions have been issued, upload application.

1. Is a Collier County Special Treatment Permit Required?
Yes ☐ No ☐ Date Applied _____ Date Obtained _____ Permit No. _____
2. Is a South Florida Water Management District Consumptive Use Permit or exemption required?
This permit is needed for withdraw of water for agricultural use.
Yes ☐ No ☐ Date Applied _____ Date Obtained _____ Permit No. _____
3. Is a South Florida Water Management District Surface Water Management Permit or Exemption required?
Yes ☐ No ☐ Date Applied _____ Date Obtained _____ Permit No. _____

4. Is a United States Army Corps of Engineers or SFWMD permit or exemption required for impacts to wetlands?
Yes ☐ No ☐ Date Applied _____ Date Obtained _____ Permit No. _____
5. Do you propose clearing in wetlands?
Yes ☐ No ☐ If Yes, clearly indicate locations on an attached aerial or site plan. It is the owner/agent's responsibility to obtain all required State and Federal jurisdictional wetland permits.
6. Is this activity for silviculture? Yes ☐ No ☐ If Yes, attach a management plan prepared by a forester/resource manager (private, industrial or State [e.g. Division of Forestry]).
7. Are there any State or Federally listed plant or animal species on your site to the best of your knowledge?
Yes ☐ No ☐ If Yes, please explain _____

**** It is the owner/agent's responsibility to obtain all required State and Federal permits required for impacts related to listed species.

ELECTRONIC SUBMITTAL REQUIREMENT CHECKLIST

REQUIREMENTS FOR REVIEW:	ELECTRONIC DOCUMENTS	REQUIRED
Completed Application	1	<input checked="" type="checkbox"/>
Proof of Ownership (Warranty Deed or Tax Statement)	1	<input checked="" type="checkbox"/>
Agent Affidavit of Authorization/Evidence of Authority-required when agent applying on behalf of owner	1	<input checked="" type="checkbox"/>
An aerial photograph or Site Plan that includes a general vegetation inventory identifying the acreages of existing native vegetation on site and proposed clearing plan (FLUCFCS Map)	1	<input checked="" type="checkbox"/>
Should the County's On-site inspection determine that the activity may cause potential or actual impacts to wetlands and/or protected State and Federally listed wildlife species, then the applicant must submit data relating to said environmental impacts as per, and subject to, Collier County Growth Management Plan-Conservation and Coastal Management Element policies 6.2.4, 6.2.5. and 6.2.8. and objective 7.1 (and associated policies) and Collier County Land Development Code Chapter 3.	1	<input type="checkbox"/>
Agricultural Operation Disclosure Affidavit	1	<input checked="" type="checkbox"/>

FEES

- Non-refundable Application Fee: \$250.00 up to the 1st acre and \$50.00 per acre for each additional acre or fraction thereof (maximum of \$3,000.00)

PAYMENT

Online Payment Guide can be located: [Here](#)

Completed application may be submitted online [GMD Public Portal](#)

If unfamiliar to applying on portal or have questions, please look over our [E-PermittingGuide](#)

OTHER PERMITS/APPROVALS MAY BE REQUIRED FOR WATER USE AND/OR SURFACE WATER MANAGEMENT FROM SOUTH FLORIDA WATER MANAGEMENT DISTRICT (SFWMD); WILDLIFE ISSUES FROM U.S. FISH AND WILDLIFE SERVICE, OR FLORIDA FISH AND WILDLIFE CONSERVATION COMMISSION (USFWS AND FFWCC); AND WETLAND IMPACTS FROM US FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION or SFWMD. THE OWNER IS RESPONSIBLE FOR OBTAINING ALL OTHER FEDERAL AND STATE AGENCY PERMITS AND PROVIDING COPIES TO COLLIER COUNTY LAND DEVELOPMENT SERVICES DEPARTMENT TO FILE WITH THIS NOTIFICATION.

In accordance with F.S. 125.022 Issuance of a development permit by a county does not in any way create any rights on the part of the applicant to obtain a permit from a state or federal agency and does not create any liability on the part of the county for issuance of the permit if the applicant fails to obtain requisite approvals or fulfill the obligations imposed by a state or federal agency or undertakes actions that result in a violation of state or federal law.

The owner/agent should contact other Federal, State and Local agencies that may require permits.

I, _____, affirm that I am the owner of the property described in this application and that I understand the applicable provisions of Collier County Land Development Code (LDC).

By signing this notification, I affirm that I have not severed my Transfer of Development Rights (TDR) and I acknowledge the 25-year prohibition on the creation of TDR Credits from land cleared for agricultural operations after June 19, 2002, as set forth in the Collier County LDC.

If the land is outside the Rural Lands Stewardship Area, by signing this notification, I acknowledge that, if the land being cleared for agricultural operations is converted to a non-agricultural use within 25 years after the clearing occurs, the property shall become subject to the native vegetation requirements of the Collier County LDC, that would have been required prior to any clearing taking place.

Florida Statute Section 837.06 (False Official Statements Law) states that: "Whoever knowingly makes a false statement in writing with the intent to mislead a public servant in the performance of his official duty shall be guilty of a misdemeanor of the second degree, punishable as provided by a fine to a maximum of \$500 and/or maximum of sixty-day jail term.

Owner / Agent Signature

Date

Printed Name of Owner or Agent

THE APPLICANT SHALL PROVIDE RESPONSES TO THE FOLLOWING TO DETERMINE IF THE PROPERTY IS A BONA FIDE FARM OPERATION UNDER THE RIGHT TO FARM ACT FOR ZONING PURPOSES AND FOR AGRICULTURAL CLEARING PERMITS OR NOTICES

- A. PERSONS CLAIMING RIGHTS UNDER THE FLORIDA RIGHT TO FARM ACT (FS 823.14) AND AGRICULTURAL LANDS AND PRACTICES ACT (FS 163.3162) NEED TO PROVIDE THE FOLLOWING:
1. Proof of current Agricultural Exemption, granted by the Collier County Property Appraiser, for the subject property, on which the activity is occurring or is to occur. (FS 193.461) Note that this exemption requires that the land be used primarily for "Bona fide agricultural purposes." "Bona fide agricultural purpose" is defined as "good faith commercial agricultural use of the land."
- AND
2. Proof of a Bona Fide Farm Operation, in accordance with the following definitions (based on FS 823.14):
 - a. Farm is defined as land, buildings, support facilities, machinery and other appurtenances used in production of farm or aquaculture products.
 - b. Farm product as defined in Section 5.01 I, or any animal or insect useful to humans and includes any product derived therefrom.
 - c. Farm operation is defined as all conditions or activities by the owner, lessee, agent, independent contractor, and supplier which occur on a farm in connection with the production of farm, honeybee, or apiculture products and includes, but is not limited to, the marketing of produce at roadside stands or farm markets; the operation of machinery and irrigation pumps; the generation of noise, odors, dust, and fumes; ground or aerial seeding and spraying, the placement or operation of an apiary; the application of chemical fertilizers, conditioners, insecticides, pesticides, herbicides; and the employment and use of labor.
 3. The applicant must submit information to be reviewed in order to determine the existence of Bona Fide Farm Operation or clear commitment to establish such an operation. Not all of the items listed below must be submitted, but the determination will be made based on substantive information provided.
 - a. Describe farm operation
 - b. Documentation of a clearly identifiable farm product or products resulting from the proposed or existing activity
 - c. Identification of the proportion of the gross acreage of the land used or to be used for agricultural purposes as compared to any residential or other nonagricultural uses on the subject property
 - d. Comparison of the proposed farm operation with similar operations in the immediate area in terms of acreage and farm product(s)
 - e. Copy of Schedule "F" or other Federal Income Tax return filed in connection with farm income and expenditures related to the subject property's current farm operation
 - f. Length of time the subject property has been used for agriculture by the current operation and level of activity achieved

- g. Itemized list indicating amount of time, effort and capitalization invested in the agricultural use of the land by the applicant and owner, including receipts for goods or materials used to establish or maintain the use
- h. Proof of current or past membership or involvement with agricultural associations, societies, or other organizations specific to forms of agriculture
- i. Farm Serial Number assigned by USDA Farm Services
- j. Agricultural operation Disclosure Affidavit (attached)

AND

- 4. Proof that the proposed or existing activity is regulated by Best Management Practices (BMP) developed by the Florida Department of Environmental Protection, Florida Department of Agriculture and Consumer Services, and/or the South Florida Water Management District;

OR

- 5. Proof that State Agency Interim Measures regulate the proposed or existing activity. These Agencies are the Florida Department of Environmental Protection, Florida Department of Agriculture and Consumer Services, and/or the South Florida Water Management District;

OR

- 6. Proof that the State Agency Administrative Regulations regulate the proposed or existing activity. These Agencies are the Florida Department of Environmental Protection, Florida Department of Agriculture and Consumer Services, and/or the South Florida Water Management District;

OR

- 7. Proof that the Federal Agency Administrative Regulations regulate the proposed existing activity. These agencies are the US Army Corps of Engineers, the US Department of Agriculture, and/or the US Environmental Protection Agency;

AND

- 8. For only those circumstances where the proposed or existing activity relates to wellfields, proof that there is a BMP, Interim Regulation, State Administrative Regulation, or Federal Administrative Regulation that regulates the proposed activity relative to wellfields.

Staff will review documentation to determine if there is sufficient evidence (i.e., a reasonable person would conclude that a good faith commercial farm operation is in existence or will be operating on the subject property.)

- B. IS PROPERTY ZONED FOR AGRICULTURAL PURPOSES?
IS IT IN THE RURAL FRINGE MIXED OVERLAY?

- C. DOES IT QUALIFY FOR AGRICULTURAL CLEARING NOTIFICATION?

See proof of bona fide farm operation and proof of existing agricultural exemption from the property appraiser;

or

Determine if this is expansion of existing bona fide farm operation and if new lands are adjacent to the existing farm operation

Note: If it is zoned Agricultural and does not have an Agricultural exemption from the property appraiser, use the Agricultural Clearing Permit for future bona fide farm operation.

AGRICULTURAL OPERATION DISCLOSURE AFFIDAVIT

STATE _____
COUNTY _____
Folio Number(s): _____
Farm Location / Address: _____
Printed Name of Property Owner: _____
Mailing Address: _____
Phone#: _____ Email: _____

823.14, F.S. Florida Right to Farm Act (2018)

(3) Definitions

- (a) "Farm" means the land, building, support facilities, machinery, and other appurtenances used in the production of farm or aquaculture products.
- (b) "Farm operation" means all conditions or activities by the owner, lessee, agent, independent contractor, and supplier which occur on a farm in connection with the production of farm, honeybee, or apiculture products and includes, but is not limited to, the marketing of produce at roadside stands or farm markets; the operation of machinery and irrigation pumps; the generation of noise, odors, dust, and fumes; ground or aerial seeding and spraying; the placement and operation of an apiary; the application of chemical fertilizers, conditioners, insecticides, pesticides, and herbicides; and the employment and use of labor.
- (c) "Farm product" means any plant, as defined in s. 581.011, or animal or insect useful to humans and includes, but is not limited to, any product derived therefrom.

I certify that the property described in this Affidavit is or will be used for a bona fide farm operation pursuant to Section 823.14, F.S. I understand a bona fide agricultural purpose is a good faith commercial agricultural use of land.

I further certify that the property will be used in the agricultural production of: [check all that apply]

- | | | | |
|----|------------------------------|--------------------------|-----|
| a. | Animals | <input type="checkbox"/> | Yes |
| b. | Vegetables/Crops | <input type="checkbox"/> | Yes |
| c. | Aquaculture | <input type="checkbox"/> | Yes |
| d. | Citrus Products | <input type="checkbox"/> | Yes |
| e. | Nursery/Landscaping Products | <input type="checkbox"/> | Yes |
| f. | Other | <input type="checkbox"/> | Yes |

If "Other" Please Explain _____

NOTE: Florida Statute 837.06 False Official Statements. – Whoever knowingly makes a false statement in writing with the intent to mislead a public servant in the performance of his or her official duty shall be guilty of a misdemeanor of the second degree, punishable as provided by a fine to a maximum of \$500 and/or maximum of sixty-day jail term.”

Owner's Signature (must be notarized)

_____ Date _____

This affidavit was subscribed before me this ____ day of _____, 20__ by _____, who is personally known to me or produced _____ as identification, and who stated upon oath that the statements in this affidavit are true and correct.

Notary Public

Printed, Typed, or Stamped