

61

COMMONWEALTH OF MASSACHUSETTS

TOWN OF CONWAY

FISCAL YEAR 2009

FOREST LAND CLASSIFICATION GENERAL LAWS CHAPTER 61 §1

INSTRUCTIONS: Complete all sections that apply. Please print or type.

_____ **CONTACT PERSON** _____ **TELEPHONE #** _____

IDENTIFICATION Complete this section fully.

Name of applicant(s) _____

Mailing address _____

Please attach State Forester's Certificate and Approved Forest Management Plan and list lots below

| Property Covered by Application | | | | | | |
|---|-----------|----------|------------------|-------------|------------------------|-------------|
| List Parcel Information for up to 5 lots to be classified | Map & Lot | Location | Deed Book & Page | Total Acres | Acres to be Classified | Corrections |
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SIGNATURE. All owners must sign here to complete the application. This application has been prepared or examined by me. Under the pains and penalties of perjury, I declare that to the best of my knowledge and belief, it and all accompanying documents and statements are true, correct and complete.

I also certify that I have received a copy of the Property Owner's Acknowledgement of Rights and Obligations under the Classified Forest Land Program as part of this application and that I have read and I understand it.

Owner

Date

*If

signed by agent, attach copy of written authorization to sign on behalf of taxpayer

DISPOSITION OF APPLICATION (FOR ASSESSORS' USE ONLY)

| | | | |
|-----------------|----------|---------|--------------------|
| • OWNERSHIP | • ALL | GRANTED | DATE VOTED/DEEMED |
| | • PART | | DATE NOTICE SENT |
| • MINIMUM ACRES | • DEEMED | | BOARD OF ASSESSORS |
| • USE/CONDITION | • ALL | DENIED | |
| | • PART | | |
| | • DEEMED | | |
| | | | DATE |