



## INSTRUCTIONS FOR NON-RENEWAL FOR AGRICULTURAL PRESERVES

The following information must be submitted for filing on a non-renewal from the agricultural preserve program.

### THIS PACKAGE CONTAINS

- ✓ SUBMITTAL REQUIREMENTS
- ✓ APPLICATION FORM
- ✓ AGRICULTURAL ACTIVITIES SUPPLEMENT

[Click to download Agricultural Activities Supplement form](#)

### AND, IF ✓'D, ALSO CONTAINS

- AGREEMENT FOR PAYMENT OF PROCESSING FEES

[Click to download Agreement to Pay form](#)

- PLAN AND MAP REQUIREMENTS

[Click to download Site Plan and Topographical Map Requirements](#)

**Must be filed prior to SEPTEMBER 30.**

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#### South County Office

123 E. Anapamu Street  
Santa Barbara, CA 93101  
Phone: (805) 568-2000  
Fax: (805) 568-2030

#### Energy Division

123 E. Anapamu Street  
Santa Barbara, CA 93101  
Phone: (805) 568-2000  
Fax: (805) 568-2030

#### North County Office

624 W. Foster Road, Suite C  
Santa Maria, CA 93455  
Phone: (805) 934-6250  
Fax: (805) 934-6258

Website: [www.sbcountyplanning.org](http://www.sbcountyplanning.org)

**SUBMITTAL REQUIREMENTS****Cities Sphere of Influence**

Is this site within a city sphere of influence\*\*

 Yes No

If yes, which city? \_\_\_\_\_

- \_\_\_ 10 Copies of completed application form
- \_\_\_ 10 Copies of a site plan, see instructions:  
[Click to download Site Plan and Topographical Map Requirements](#)
- \_\_\_ 10 Agricultural Activities Supplemental Form  
[Click to download Agricultural Activities Supplement form](#)
- \_\_\_ 10 Reason for the non-renewal request
- \_\_\_ 7 Clear, legible copies of Legal Descriptions of the exterior boundaries of all parcels included in the application
- \_\_\_ 1 Copy of Recorded Agricultural Preserve Contract with original recording number and date
- \_\_\_ 1 Check payable to Planning & Development
- \_\_\_ 1 Agreement to Pay Form  
[Click to download Agreement to Pay form](#)

\*\* If additional information is needed regarding location of a City's Sphere of Influence, please contact our zoning information counter.



PLANNING & DEVELOPMENT
PERMIT APPLICATION

SITE ADDRESS: \_\_\_\_\_

ASSESSOR PARCEL NUMBER: \_\_\_\_\_

PARCEL SIZE (acres/sq.ft.): Gross \_\_\_\_\_ Net \_\_\_\_\_

ZONING: \_\_\_\_\_

COMPREHENSIVE/COASTAL PLAN DESIGNATION: \_\_\_\_\_

Are there previous permits/applications? [ ]no [ ]yes numbers: \_\_\_\_\_

(include permit# & lot # if tract)

Did you have a pre-application? [ ]no [ ]yes if yes, who was the planner? \_\_\_\_\_

Are there previous environmental (CEQA) documents? [ ]no [ ]yes numbers: \_\_\_\_\_

Project description summary: \_\_\_\_\_

1. Financially Responsible Person \_\_\_\_\_ Phone: \_\_\_\_\_ FAX: \_\_\_\_\_
(For this project)

Mailing Address: \_\_\_\_\_
Street City State Zip

2. Owner: \_\_\_\_\_ Phone: \_\_\_\_\_ FAX: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ E-mail: \_\_\_\_\_
Street City State Zip

3. Agent: \_\_\_\_\_ Phone: \_\_\_\_\_ FAX: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ E-mail: \_\_\_\_\_
Street City State Zip

4. Arch./Designer: \_\_\_\_\_ Phone: \_\_\_\_\_ FAX: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ State/Reg Lic# \_\_\_\_\_
Street City State Zip

5. Engineer/Surveyor: \_\_\_\_\_ Phone: \_\_\_\_\_ FAX: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ State/Reg Lic# \_\_\_\_\_
Street City State Zip

6. Contractor: \_\_\_\_\_ Phone: \_\_\_\_\_ FAX: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ State/Reg Lic# \_\_\_\_\_
Street City State Zip

I hereby certify to the best of my knowledge, the information contained in this application and all attached materials are correct, true and complete.

Signature

Print name/date

\*\*\*\*\*

COUNTY USE ONLY

Case Number: \_\_\_\_\_ Companion Case Number: \_\_\_\_\_

Supervisorial District: \_\_\_\_\_ Submittal Date: \_\_\_\_\_

Applicable Zoning Ordinance: \_\_\_\_\_ Receipt Number: \_\_\_\_\_

Project Planner: \_\_\_\_\_ Accepted for Processing \_\_\_\_\_

Zoning Designation: \_\_\_\_\_ Comp. Plan Designation \_\_\_\_\_

**ASSESSOR'S DESCRIPTION OF PROPERTY**  
**Assessor's Parcel No.**

TheTax Code Area No.	Book – Page - Parcel	Acreage	Assessed Value Land Only

Attach copy of Current Assessor's Map showing proposed Preserve Boundaries  
 (NOTE: Only latest Assessor's Map; do not substitute others.)

**STATUS OF OWNERSHIP (check box):**

Fee \_\_\_; Probate \_\_\_; Trust \_\_\_; Escrow

Other: \_\_\_\_\_ --

**LAND TENURE (check):** Owner-operated \_\_\_; Rented \_\_\_; Leased \_\_\_; Sharecropped \_\_\_; Other \_

The following section must be filled out completely and accurately. Please do not leave any of the boxes blank. If there are no crops or acreage in a particular land class, then indicate that by writing in NONE.

**PRESENT LAND USE, CLASS, AND ACREAGE**

Land Class	Crop or Use	Soil Class, Rating, or Income/acre	Acreage
<b>PRIME Farmland</b>			
		<b>Total Prime Land Acreage</b>	
<b>NONPRIME Farmland Rangeland</b>			
		<b>Total Nonprime Acreage</b>	
<b>NONFARM and/or Open Space and/or Recreation (This includes all structures. Please indicate what kinds of structures exist on the property.)</b>			
		<b>Total NonFarm Acreage</b>	

**Total Acreage in Preserve**