

2025

61A

COMMONWEALTH OF MASSACHUSETTS
TOWN OF HAMPDEN
FISCAL YEAR 2025
AGRICULTURAL OR HORTICULTURAL LAND CLASSIFICATION
GENERAL LAWS CHAPTER 61A SECTION 6

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

CONTACT PERSON

TELEPHONE #

1. IDENTIFICATION Complete this section fully

Name of applicant(s)

Mailing address

2. Property Covered by Applications: Please list the information for up to 5 lots in the grid below.

of Acres

Table with 9 columns: Map + Lot, Location, Total Acres, Excluded Acres, Veggies Tobacco Sod Nursery, Dairy Forage Crops, Field Crops, Orchards Vineyard, Xmas Trees, Productive Woodland (must have a FMP), Contiguous Non-Productive Land, Permanent Pasture, Necessary Related Land. Rows 1-5 for Acres on Record and Corrections.

3. STATEMENT OF FARM INCOME IN PRECEDING YEAR. Supporting documentation, including copies of our

federal and state income tax returns, may be requested to verify your income.

- A. Gross Sales From Agricultural or Horticultural Use \$
B. Amount Received Under MA or US Soil Conservation or Pollution Abatement Program \$ Total

Provide a detailed description of the source of the farm income listed above.

4. PREVIOUS USE OF LAND. Was the land valued, assessed and taxed as classified agricultural or horticultural land under Chapter 61A for the prior two fiscal years? YES NO

If NO, was the use of the land during the prior 2 fiscal years the same as the current use described above? YES NO

If NO, describe in detail the use of the land during the prior 2 fiscal years.

If NO, was your farm income during either of the prior 2 fiscal years less than the amount reported above? Y N
If yes, list the income for that year \$ Fiscal Year

5. **LESSEE CERTIFICATION.** If any portion of the property is leased, the following statement must be signed by each lessee. I hereby certify that the property I lease is being used as described in this application and that I intend to use the property in that manner during the period to which this application applies.

Lessee

Date

6. **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 Owners Acknowledgement of Rights and Obligations under the Classified Agricultural and Horticultural Land Program as part of this application and that I have read and I understand it.

Owner(s)

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	DATE VOTED/DEEMED _____
_____ MINIMUM ACRES	_____ PART	DATE NOTICE SENT _____
_____ USE/CONDITION	_____ DEEMED	
_____ GROSS SALES		BOARD OF ASSESSORS

_____ GRANTED		_____
_____ DENIED		_____
		DATE _____
NOTES: _____		

