

**WAYNE COUNTY VOLUNTARY AGRICULTURAL DISTRICTS  
MEMBERSHIP APPLICATION**

**APPLICANT INFORMATION:**

Name: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home Phone No.: \_\_\_\_\_ Work Phone No.: \_\_\_\_\_

Mobile No. \_\_\_\_\_ Fax No.: \_\_\_\_\_

**PROPERTY INFORMATION:**

Property Location/Address: \_\_\_\_\_

Parcel No.: \_\_\_\_\_ Number of Acres: \_\_\_\_\_

**Additional Tracts:**

Street/Road Address: \_\_\_\_\_

Township: \_\_\_\_\_ Tax Map/Parcel No.: \_\_\_\_\_ Acres \_\_\_\_\_

FSA Farm No. \_\_\_\_\_ Owners: \_\_\_\_\_

Street/Road Address: \_\_\_\_\_

Township: \_\_\_\_\_ Tax Map/Parcel No.: \_\_\_\_\_ Acres \_\_\_\_\_

FSA Farm No. \_\_\_\_\_ Owners: \_\_\_\_\_

Street/Road Address: \_\_\_\_\_

Township: \_\_\_\_\_ Tax Map/Parcel No.: \_\_\_\_\_ Acres \_\_\_\_\_

FSA Farm No. \_\_\_\_\_ Owners: \_\_\_\_\_

**OWNER(S) CERTIFICATION:**

**I (We), the applicant(s), hereby certify that, to the best of my (our) ability, the foregoing application is complete and accurate. I also certify that I am the proprietor or have the authority to designate farmland into the Voluntary Agricultural District.**

Signature of Owners/Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

\_\_\_\_\_ Date: \_\_\_\_\_

Application should be accompanied with a \$50.00 check made payable to **County of Wayne.**

**Mail To:** Voluntary Agricultural Districts  
PO Box 68  
Goldsboro, NC 27533-0068