



APPLICATION AND RETURN FOR AGRICULTURAL CLASSIFICATION OF LANDS

DR-482
R. 12/00

Section 193.461, Florida Statutes

This completed application, including all required attachments, must be filed with the county property appraiser on or before **March 1 of the current tax year.**

Applicant Name: Address:	Return to: C. Raymond McIntyre, C.F.A. Highlands County Property Appraiser 560 S. Commerce Ave. Sebring FL 33870-3899 Attention: Agriculture Department
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Parcel ID: _____
Legal Description: _____

Lands used primarily for agricultural purposes	Number of Acres	How long in this use?	Agricultural Income from this Property Complete for the past 4 years.				
		yrs	Year	Crop or Use	Gross Income	Expense	Net Income
Citrus:		yrs	2024				
Cropland:		yrs	2024				
Grazing Land: Number of Livestock: _____		yrs	2024				
Timberland:		yrs	2024				
Poultry, swine or beeyards:		yrs					
Aquaculture products:		yrs					
Other:			Date Purchased :		Purchased Price :		

Has a Tangible Personal Property Tax Return, Form DR-405, been filed with the county property appraiser for machinery and equipment? Form DR-405 is incorporated, by reference, in Rule 12D-16.002, Florida Administrative Code. Yes No

If yes, what name was the tangible return filed under? _____

Is the real property leased to others? **If yes, attach copy of lease agreement.** Yes No

As of January 1 of this year, 2024 the lands listed above were used **primarily** for "bona fide" agricultural purposes. Bona fide agricultural purpose means "good faith commercial agricultural use of the land."

The property appraiser may require additional information (*including requesting an annual audited financial statement*) and will notify you if additional information or documentation is needed to determine eligibility for the classification requested.
I will comply with any reasonable request.

I certify all information on this form and any attachment is true, correct, and in effect on January 1 of this year. If prepared by someone other than the applicant, the preparer signing this application certifies that this declaration is based on all information he or she has knowledge of.

Signature

Date

Email Address

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Phone Number

For Record Purposes Only This acknowledges receipt of your Application for Agricultural Classification of Lands on _____ Date _____ for the above described property.

Highlands County

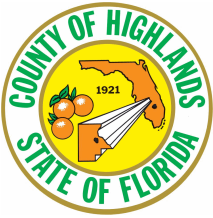
Signature

Record of Action of County Property Appraiser

- Application approved and all lands are classified agricultural
- Application disapproved and agricultural classification of lands denied on all lands.
- Application approved in part and disapproved in part. Agricultural classification of lands approved on the following described portion.

Signature

Date



AGRICULTURAL CLASSIFICATION SUPPLEMENTAL INFORMATION

HR-482SUP
R. 07/21

Section 193.461, Florida Statutes

This completed application, including all required attachments, must be filed with the county property appraiser on or before **March 1 of the current tax year**.

1. Did you purchase this land with the intent of receiving income from its agricultural productivity?
Yes No
2. What annual income do you anticipate from this property? \$ _____
3. What annual expenses do you anticipate for this property? \$ _____
4. Do you (or the lessee, if the property is leased) use other land in the county for Bona Fide Ag purposes?
Yes No

If so, please list the parcel ID numbers used by that agriculture business:

_____	_____
_____	_____
_____	_____

5. Do you file a Schedule F (Profit and Loss from Farming) with your IRS income tax return?
Yes No
If yes, please provide a copy. Note: All financial information is held confidentially.

6. If you are not providing a Schedule F, what documentation can you provide to support your income and expenses (Tax documents, receipts, payments, contracts, etc.)? _____
Please provide copies of any documentation that you would like taken into consideration.

The information and answers to questions herein are complete, true and correct to the best of my knowledge.

PRINTED NAME: _____

Applicants signature: _____

Phone #: _____

DATE: _____

*If you have any questions regarding this form, please contact the Agriculture Department
Zuleika Agosto (863) 402-6683