



## DIVISION OF PLANNING AND PERMITTING

### FREDERICK COUNTY, MARYLAND

30 NORTH MARKET STREET • FREDERICK, MARYLAND 21701  
PHONE (301) 600-1138 FAX (301) 600-2309

## Family Farm Impact Fee Waiver/Exemption

1. **Applicant Name:** \_\_\_\_\_

2. **Phone:** \_\_\_\_\_ **Fax:** \_\_\_\_\_ **Email:** \_\_\_\_\_

3. **Building Permit Number:** \_\_\_\_\_

4. **Name of Farmer:** \_\_\_\_\_

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

5. **Name of Farmer's Child or Grandchild:** \_\_\_\_\_

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

### Attachments to be submitted to support the following:

6. **Ownership Verification:** Applicant must provide evidence that they are the child or grandchild of the farmer (person who owns and operates the farm) as per Ordinance section 1-22-7 (G) (2)(a):

*(a) The Farm Lot must have been transferred directly from a Farmer to the Farmer's Child or Grandchild*

7. **How the Applicant Supports the Farm Operation:** Applicant shall provide a description of how they support the farm operation as per Ordinance Section 1-22-7 (G) (2)(b):

*(b) The Farmer's Child or Grandchild must show proof that he or she currently provides support to the Farm, whether by physical or administrative work, or by financial support*

8. **Farm Operation:** A description of the Agricultural activity on the farm shall be provided including evidence that the activity is conducted by the owner of the farmer and not by a lessee.

9. **Farm Parcel Size:** Evidence shall be provided that the farm parcel is at least 25 acres in size.

10. **Notarized Affidavit** (See attached)

### **For Office Use Only:**

I HEREBY CERTIFY THAT THE ABOVE NAMED APPLICANT IS ELIGIBLE TO RECEIVE THE DEVELOPMENT IMPACT FEE WAIVER OR EXEMPTION AND HAS PROVIDED THE REQUIRED DOCUMENTATION IN ACCORDANCE WITH THE PROGRAM REQUIREMENTS.

Approve

\_\_\_\_\_  
Anne Bradley, Administrator

\_\_\_\_\_  
Date

**AFFIDAVIT**

**Certification:** This is to certify that I, \_\_\_\_\_, will comply with regulatory requirements outlined in the Frederick County Ordinance 14-19-674, as applicable.

**(G) IMPACT FEE WAIVER FOR FARM LOTS.**

**(1) DEFINITIONS – FOR THE PURPOSES OF THIS SUBSECTION, THE FOLLOWING TERMS SHALL HAVE THE DESIGNATED DEFINITIONS:**

- (a) FARM – A PARCEL OR LAND NOT LESS THEN 25 ACRES IN SIZE ON WHICH AN AGRICULTURAL ACTIVITY, AS DEFINED IN §1-19-11,100 OF THE ZONING ORDINANCE, IS BEING ACTIVELY CONDUCTED AS OF THE DATE OF APPLICATION FOR THE FARM LOT WAIVER.
- (b) FARMER – A PERSON WHO OWNS AND OPERATES A FARM.
- (c) FARM LOT – A LOT WHICH HAS BEEN LEGALLY SUBDIVIDED FROM A FARM BY A FARMER.
- (d) CHILD – A PERSON’S OFFSPRING, WHETHER NATURAL OR LEGALLY ADOPTED.
- (e) GRANDCHILD – THE OFFSPRING OF A CHILD, AS DEFINED HEREIN, WHETHER NATURAL OR LEGALLY ADOPTED.

**(2) IMPACT FEES COLLECTED UNDER THIS CHAPTER SHALL BE WAIVED FOR FARM LOTS IF THE FOLLOWING CONDITIONS ARE MET AT THE TIME THAT THE WAIVER IS APPLIED FOR:**

- (a) THE FARM LOT MUST HAVE BEEN TRANSFERRED DIRECTLY FROM A FARMER TO THE FARMER’S CHILD OR GRANDCHILD;
- (b) THE FARMER’S CHILD OR GRANDCHILD MUST SHOW PROOF THAT HE OR SHE CURRENTLY PROVIDES SUPPORT TO THE FARM, WHETHER BY PHYSICAL OR ADMINISTRATIVE WORK, OR BY FINANCIAL SUPPORT.

**(3) IF THE FARMER’S CHILD OR GRANDCHILD SELLS OR OTHERWISE TRANSFERS THE FARM LOT (EXCEPT BY REASON OF HIS OR HER DEATH) WITHIN 5 YEARS AFTER THE DATE OF ISSUANCE OF THE BUILDING PERMIT TO WHICH THE IMPACT FEE WAIVER HAS BEEN APPLIED, THEN THE FARMER’S CHILD OR GRANDCHILD SHALL BE OBLIGATED TO REPAY THE TOTAL AMOUNT OF THE WAIVED IMPACT FEES TO THE COUNTY.**

**(4) IF THE FARMER’S CHILD OR GRANDCHILD SELLS OR OTHERWISE TRANSFERS THE FARM LOT MORE THAN 5 YEARS AFTER THE DATE OF ISSUANCE OF THE BUILDING PERMIT TO WHICH THE IMPACT FEE WAIVER HAS BEEN APPLIED, THEN THE OBLIGATION TO REPAY THE WAIVED IMPACT FEES SHALL NOT APPLY.**

**(5) THE OBLIGATION TO REPAY THE WAIVED IMPACT FEES SHALL BE MEMORIALIZED BY A RECORDED LIEN ON THE FARM LOT, WHICH SHALL, BY ITS TERMS, EXPIRE FIVE (5) YEARS AFTER THE DATE OF ISSUANCE OF THE BUILDING PERMIT TO WHICH THE IMPACT FEE WAIVER HAS BEEN APPLIED.**

\_\_\_\_\_  
**Authorized Signature of Applicant**

\_\_\_\_\_  
**Date**

STATE OF MARYLAND, COUNTY OF \_\_\_\_\_, to wit:

Subscribed and sworn to before me this, \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_ .

\_\_\_\_\_  
Notary Public

My Commission Expires: \_\_\_\_\_

SEAL