



Riparian Buffer Strip Application

Applicant Name:

Property Owner Name (if different):

Applicant Address:

Property Address (if different):

Applicant Phone Number:

E-mail Address:

Township:

Parcel Number:

Legal Description:

By electronically signing this document, I certify that I am authorized to sign and that the above information is true and correct.

Applicant Signature:

Date:

For County Director of Equalization Use

Total Acres in Parcel:

Total Acres in Buffer Strip:

Eligible Acres in Buffer Strip

Soil Map Unit	Rating	Acres	\$/Acre	Full and True Value	Final Adjusted Value <small>(Full and True Value x .60)</small>	Valuation Reduction <small>(Full and True Value - Final Adjusted Value)</small>
Total						

Officer Signature:

Date: