



# FARM EXEMPT CERTIFICATION APPLICATION

Submit required documentation to:  
Wake County Planning Department/Current Planning Section  
PO Box 550 Wake County Office Building  
Raleigh, NC 27602-0550 336 Fayetteville Street Mall, Downtown Raleigh  
Contact Current Planning at (919) 856-6335 for additional information.

File #  
Fee  
Amt Paid  
Check #  
Rec'd Date  
Rec'd By

PERMIT # \_\_\_\_\_ D # \_\_\_\_\_ USE CODE # \_\_\_\_\_

This application is for (check one):  Farm Dwelling  Farm Structure

### Provide the following information as known:

I certify that realty, building, and/or structure at:

ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ ZIP \_\_\_\_\_

TAX ACCT# \_\_\_\_\_ to be used on land area shown on MAP \_\_\_\_\_

PARCEL \_\_\_\_\_ and/or PIN # \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ is solely for agriculture, forestry, and horticulture operations.

FOR FARM DWELLING: I further certify that this dwelling is to be occupied by persons that will farm the land described above.

FOR FARM STRUCTURE: I further certify that this structure is necessarily incidental to such agricultural production such as housing livestock and packing, treating or storing of products/equipment.

I understand that realty, buildings, and/or structures for non-agriculture uses are subject to the provision of the WAKE COUNTY UNIFIED DEVELOPMENT ORDINANCE. I further understand that my signing of this statement will exempt this structure and the use of this structure as stated above from the zoning regulations of Wake County. I understand that I must comply with Wake County Environmental Health and Building Inspections requirements, when applicable.

Proposed use of building: \_\_\_\_\_

Previous existing uses: \_\_\_\_\_

\_\_\_\_\_

Total years owned farm: \_\_\_\_\_ Total years leased farm: \_\_\_\_\_ Farm #: \_\_\_\_\_

Township: \_\_\_\_\_ Acres: \_\_\_\_\_ Acres cultivated: \_\_\_\_\_ Census tract: \_\_\_\_\_ - \_\_\_\_\_

What is impact on surrounding neighborhood and adjacent properties?"

Note: For the purposes of establishing a use as farm exempt, the definition of a **BONA FIDE FARM** does NOT include the following: retail sale of products not produced on the property, farm-serving uses, commercial agricultural services (such as veterinary services, landscape contracting, crop services or animal services for the products of other farms), riding clubs, or grounds and stables as principal use.

Applicant: \_\_\_\_\_  owner  lessee Phone #: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

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

**Staff Use Only**

FIELD INSPECTION BY \_\_\_\_\_ DATE \_\_\_/\_\_\_/\_\_\_ TELEPHONE # \_\_\_\_\_ - \_\_\_\_\_

RECOMMENDATIONS: \_\_\_\_\_

COMMENTS: \_\_\_\_\_

FLOOD CERTIFICATION \_\_\_\_\_ ENGINEER \_\_\_\_\_ DATE \_\_\_/\_\_\_/\_\_\_

RECOMMENDATIONS: \_\_\_\_\_

FARM SERVICE AGENCY (919) 231-6126 VERIFIED BY \_\_\_\_\_ DATE \_\_\_/\_\_\_/\_\_\_

WCS & WC PROGRAM (919) 250-1056 VERIFIED BY \_\_\_\_\_ DATE \_\_\_/\_\_\_/\_\_\_

ZONING (919) 856-6335 ZONING DISTRICT \_\_\_\_\_ VERIFIED BY \_\_\_\_\_ DATE \_\_\_/\_\_\_/\_\_\_

HEALTH DEPT. (919) 856-7400  SEPTIC  WELL  GARBAGE DISP BED # \_\_\_\_\_ BATH # \_\_\_\_\_

FEES \_\_\_\_\_ RECEIPT # \_\_\_\_\_ VERIFIED BY \_\_\_\_\_ DATE \_\_\_/\_\_\_/\_\_\_

Notes: All documents and maps submitted as required become the property of Wake County. The Wake County Unified Development Ordinance can be found at [www.wakegov.com](http://www.wakegov.com).