

WASHINGTON TOWNSHIP MUNICIPAL COMPLEX | ADMINISTRATIVE OFFICES 11798 BUCHANAN TRAIL EAST, WAYNESBORO, PA 17268
Phone: 717-762-3128 | Fax: 717-762-1775 www.washtwp-franklin.org

AGRICULTURAL DISTRICT EVALUATION SHEET

Application Part 1 - Form 1

Part I	<u>Identification</u>							
Agricultural District Number:								
	Property Owner:							
Own	Owner Address:							
Tax 1	Tax Number:							
Acrea	Acreage:							
Loca	tion of Property:							
—— Part II	Section 7 Evaluation							
1.0	Viability of Active Farming on site							
1.10	•							
1.11	Percentage of Prime Agricultural Soils:							
1.12	Soils Groups							
	a.							
	b.							
	c.							
	d.							
	e. f.							
1.20								
1.20								
1.31	1 9 1 7							
_								
1.32	Percentage of Property over 15%:							
1.40	Markets for Farm Produce – Adequate							
1.50		Condition						
1.51	No Improvements							
1.52 1.53	Barn Silos							
1.54	Outbuildings							
1.55	Other							
1.60	Present Status of Farming							
1.61	ϵ							
1.62	Field Crops							
1.63	Orchard							

1.64	Other						
1.70	Anticipated Trends – Fo	avorable					
1.80 2.0 2.1	Other Factors Presence of Viable Farm On-Site	n Land Not in	Use				
2.2	2.11 None: Surrounding Area 2.21 None:						
3.0 3.1	Nature & Extent of Lan On-Site	d Use Other th	an Active Farm	ing			
3.2 4.0	3.11 None: Off-Site - See Item 7.1 Local Government Dev	l through 7.4	3.12 Type:				
4.1 5.0	Zoning Classification: Local Government Comprehensive Plan						
5.1	Classification:						
6.0 6.1	Other Information Public Water On-Site;	Yes: 1	No:				
6.2	Public Sewer On-Site;	Yes: 1	No:				
7.0	Evaluation of Surrounding Properties & Land Use Ag Use Ag/Rural Residential Use Residential Business/Industrial Other Ag District						
7.1	To North _						
7.2	To East						
7.3	To South						
7.4	To West						
	<u>To Be</u>	Completed	by The Town	<u>ship</u>			
Part III <u>F</u>	Recommendations of Con	<u>nmittees</u>					
Agricultur	re Security Area Commit	tee Recommen	dation				
YES:	NO:		Date: _				
Franklin (County Planning Commis	ssion Recomme	endation				
YES:	NO:		Date: _				
Part IV D	ecision of Supervisors						
Superviso	ors: YES:	NO:	I	Date:			