

LEE COUNTY VOLUNTARY AGRICULTURAL DISTRICTS

*** For Multiple Ownership Addendum ***
All parcels listed on this application must have common ownership

APPLICANT INFORMATION:

(3) Owner Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Home Phone No: _____ Work No: _____
Mobile No: _____ Fax No: _____
E-mail: _____

(4) Owner Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Home Phone No: _____ Work No: _____
Mobile No: _____ Fax No: _____
E-mail: _____

(5) Owner Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Home Phone No: _____ Work No: _____
Mobile No: _____ Fax No: _____
E-mail: _____

(6) Owner Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Home Phone No: _____ Work No: _____
Mobile No: _____ Fax No: _____
E-mail: _____

(7) Owner Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Home Phone No: _____ Work No: _____
Mobile No: _____ Fax No: _____
E-mail: _____

OWNER CERTIFICATION:

I, (We), the applicant(s), hereby certify that, to the best of my (our) ability, the foregoing application is complete and accurate.

Signature of Owners/applicant: _____ Date: _____
Signature of Owners/applicant: _____ Date: _____
Signature of Owners/applicant: _____ Date: _____
Signature of Owners/applicant: _____ Date: _____
Signature of Owners/applicant: _____ Date: _____