Rural Assessment Policy - Farm Land Declaration Form

Owner: _____

Address: _____

_____

_____

LANDS:

Pt.	Sec	Twp	Rng	M	Municipality	Owner	Actively Farmed	Leased by others	Ownership share
*If additional space is required please use page 2									

Primary Residence:

Pt.	Sec	Twp	Rng	M	Municipality

Plan	Lot	Blk	Municipality

Used Cheifly in conjunction with farming operations:

Yes	No

Yes	No

Additional Residences:

Pt.	Sec	Twp	Rng	M	Municipality

Plan	Lot	Blk	Municipality

Yes	No

Yes	No

***I declare that the information provided on this statement is correct to the best of my knowledge:**

Signature: _____

Date: _____

PLEASE RETURN THIS FORM TO THE ASSESSMENT DEPT:

via mail: **KCL CONSULTING INC.**
Suite 179, 3-11 Bellerose Dr.
St Albert, AB.
T8N 5C9
att: *Jolene Gudeit*
fax: **1-780-419-2651**
email: assessor@kcl-consulting.com