AGRI-TOURISM EVENT APPLICATION

Date: ____________________  Project ID # ____________________
(Aglands Staff Use Only)

PART A – OPERATOR OR ENTITY MAKING THE REQUEST

Individual(s) / Entity Making Request: __________________________________________________

Contact Name: ________________________________ Preferred Contact Number: ________________

Email Address: ____________________________________________________________

PART B – FARM / LAND OWNER OF EVENT LOCATION (if different from Part A)

Farm / Land Owner: ____________________________________________________________

Preferred Contact Number: ________________ Email: _____________________________

PART C – PROPERTY IDENTIFICATION & PROPOSED EVENT(S)

County: ___________________________ Parcel #/Tax ID # ____________________________

Event Description: (e.g. Wedding, Party, Conference) ATTACH A DESCRIPTION AND PLAN FOR THE
PROPOSED EVENT.

Maximum Number of Visitors Anticipated for Any One Event: ________________________________

Note: Must Meet Fire Marshal & County Requirements

Is This Event Year Round? (Yes/No): ___________ If No, Please Indicate Anticipated Months of Operation:

List of Farm Structures to be Used for the Event(s):

____________________________________________________________________________________

Describe the impact, if any, the proposed event will have on the current agricultural use of the farm lands.

________________________________________________________________________________________

________________________________________________________________________________________

PART D – ADDITIONAL INFORMATION & SIGNATURE

- Please attach a Map of the farm to include farm structure(s) to be used and parking area(s)
- I/We understand that the applicant is responsible for obtaining all approvals/permits before
  starting this business (e.g. county, DelDOT, fire marshal)

Signature: _____________________________________________ Date: ______________________

2016 DDA – SB 260 App