



AGRICULTURAL TRAILER AFFIDAVIT

- 1. I am the owner of a farm identified by PIN:
2. I presently use the property described above for agricultural purposes.
NOTE: If my property is 5 acres or less, I have provided and attached to this affidavit, proof of income from farm operations of at least \$1000 (per calendar year) per 55 ILCS 5/5-12001.
3. The person(s) occupying the trailer is/are engaged in an agricultural pursuit on this property.
4. The sole purpose of the trailer is only to house person(s) engaged in an agricultural pursuit on this property.
NOTE: If the trailer is vacant for more than a year or not used for persons engaged in agriculture is must be removed.
5. The trailer is/will be connected to an approved septic and water supply. Dept. of Health Permit #
6. The trailer is/will be properly anchored.
7. The property mentioned above is private property and is, therefore, not a public trailer park.
8. By signing this document I understand that I am swearing that all information on this document is true and I agree to provide the Department of Planning and Development with the following:
-An updated affidavit every two years.
-If the trailer remains, and the occupant has changed, the name of the occupant will be included in the new affidavit.
-If the trailer is removed, I will schedule an inspection to verify same.
-If the trailer is replaced, I will contact both the Health Department and Planning and Development for approval of a replacement trailer.

Signature of Property Owner

Name of Trailer Occupant(s): please print

Date:

Mailing Address of Property Owner:

Physical Address of Trailer:

Blank lines for mailing address

Blank lines for physical address

Indicate the duties of the occupant here:

Blank lines for occupant duties

OFFICE USE ONLY

Septic & Well Verified (if new)? Yes No
On-Site Inspection? Yes No
Stormwater Review Completed? Yes No

Comments:

Approved by Date