

## **AGRICULTURAL SCIENCES DIVISION**

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## **Previous Land Manager Affidavit**

APPLICANT		FARM / RANCH / BUSINESS NAME (IF DIFFERENT)	
LEGAL DESCRIPTION OF PROPERTY (TOWNSHIP – RANGE – SECTION)		FIELD NUMBER(S)	
PREVIOUS LAND MANAGER NAME			
PREVIOUS LAND MANAGER MAILING A	DDRESS		
CITY	COUNTY	STATE	ZIP
PREVIOUS LAND MANAGER PHONE NU	IMBER(S)		
When did you manage this	land? Start Date (Month	n/Year): End Date (Month	/Year):
List all materials applies		st three years. This list should incides and seed treatments.	nclude fertilizers, herbicides,
Material Applied (Brand N	lame if Applicable)	Field and Area Applied	Date and Year Applied
I certify that the informati above.	on provided is correct w	ith regards to the management	of the property described
Signature of Previous Land Man	ager		Date