

## **Previous Land Manager Affidavit**

Electronic versions available at <a href="mailto:agrorganic@mt.gov">agrorganic@mt.gov</a>

Applicant Information			
Applicant			
Legal Description of Property (Township – Range – Section)		Field Number(s)	
Previous Land Manager Name			
Previous Land Manager Mailing Address			
City State		Zip	
Previous Land Manager Phone Number(s)			
As the previous land manager, when did you manage this land?  Start Date (Month/Year): End Date (Month/Year):			
New Manager Start Date: (Month/Year):			
List all materials applied to the property in the <u>last three years</u> .  This list should include fertilizers, herbicides, pesticides, fungicides and seed treatments.			
Date & Year Applied	Field and Area Applied		Material Applied (Brand Name if Applicable)
Cinnatura Barr			
Signature Box  I certify that the information provided is correct with regards to the management of the property described above.			
Signature of Previous Land Manager:			
Printed Name: Date:			