



Request for Transfer of Existing Prior Use LCO, Grandfathered Right, or CAFO Permit

New Owner/ Authorized Agent
(Attach additional pages if Necessary)

Name: _____

Address: _____

City: _____

State: _____ Zip: _____

Contact Phone # _____

Email: _____

Owner of Record
(Attach additional pages if Necessary)

Name: _____

Address: _____

City: _____

State: _____ Zip: _____

Contact Phone # _____

Email: _____

Affidavit of Transfer: I, _____, residing at _____

Telephone number _____, has purchased the Feedlot/Dairy located at:

Location of Property: _____

Parcel Number(s) _____

Legal Description of Property: (Attach if Necessary) _____

Existing Use of Property: _____

Current Zoning District of the premises: _____

Said Operation holds a CAFO Permit # _____.

This operation contains: _____ Acres, and is permitted for a maximum capacity of _____ Animals and/or _____ AU's.

As the new owner of this operation and land, I agree to assume all duties and responsibilities of the previous owner _____, under the existing CAFO permit and conditions attached thereto, and any agreements in force with respect to that permit.

Dated this _____ day of _____, 20_____.

Applicant/Owner Certification:

I/We hereby certify that all information submitted for this transfer of CAFO is true and accurate, is prepared to the best of my ability and knowledge, and request that this transfer be processed for consideration as dairy/feedlot currently operating. Additionally, I hereby authorize agents of the county to enter upon this subject property for purposes of review concerning the pending transfer and for determining compliance with applicable county regulations.

Signature of Owner approving Transfer

Date

Printed Name : _____

Signature of New Owner of Record/Authorized Agent

Date

Printed Name: _____

State of Idaho)

ss.

County of Cassia)

On this ____ day of _____, 20____, before me, the undersigned Notary Public for the State of Idaho personally appeared _____, known or identified to me, to be the persons whose names are subscribed to the within instrument, and acknowledged to me that they executed the same.

Notary Public for Idaho

Residing at: _____

My Commission Expires: _____