**North Carolina Agricultural Cost Share Programs
New, Limited Resource Farmer, or EVAD
Self-Certification**

The purpose of this addendum is to allow applicants to certify if they qualify as a (1) beginning farmer, (2) limited resource farmer, or (3) the farm resides in an Enhanced Voluntary Agricultural District in accordance with North Carolina N.C.G.S. 106-850(b). All applicants may be asked to provide tax or other records necessary to justify their claim. All entities with which the applicant is associated, including those in other counties, shall be considered the same applicant 02 NCAC 59D .0102.

This information will be maintained in the district file as a portion of the application and is part of the public record. If the applicant qualifies for special cost share rates, please upload this form into the Cost Share Programs’ Contracting System (CS2) Reference Materials Section.

To be considered for special cost share rates for which beginning farmers, limited resource farmers, or a farm residing in an enhanced voluntary agricultural district are eligible, you must complete and sign each certification section below.

 **1. Beginning Farmer Certification**

Please initial next to the statement according to your certification.

I hereby certify that I, as the applicant, am a farmer who has not operated a farm or who has operated a farm for not more than 10 years and who will materially and substantially participate in the operation of the farm, **AND**

In the case of an individual, for the individual, including members of the immediate family of the individual, to provide substantial day-to-day labor and management of the farm, consistent with the practices in the county in which the farm is located, **OR**

In the case of an entity, for all members of the entity, to participate in the operation of the farm, with some members providing management and some members providing labor and management necessary for day-to-day activities such that if the members did not provide the management and labor, the operation of the farm would be seriously impaired.

 I hereby certify that I do not qualify as a Beginning Farmer per N.C.G.S 106-850(b).

I choose not to indicate my eligibility status. I understand that I will not be considered for special cost share rates available to qualifying applicants.

Signature Date

**2. Limited Resource Farmer**

Please initial next to the statement according to your certification.

I hereby certify that direct and indirect annual gross farm sales from the applicant’s agricultural operation does not exceed $100,000.00 in each of the previous two calendar years **AND** that the applicant’s adjusted gross income in each of the previous two calendar years did not exceed $\_\_\_\_\_\_\_ [(median household income for this county](https://linc.osbm.nc.gov/pages/employment-income/) or twice the [national poverty level;](https://www.census.gov/data/tables/time-series/demo/income-poverty/historical-poverty-thresholds.html) whichever is higher). I understand that I may be asked to provide tax or other records to justify these certifications.

I hereby certify that I do not qualify as a Limited Resource Farmer per N.C.G.S 106-850(b).

I choose not to indicate my eligibility status. I understand that I will not be considered for special cost share rates available to qualifying applicants.

Signature Date

**3. Enhanced Voluntary Agricultural District**

Please initial next to the statement according to your certification.

I hereby certify that the property where cost share assistance is occurring resides in an active enhanced voluntary agricultural district established by a county or a city by ordinance under Part 3 of Article 61 of N.C.G.S. 106-743.1.

I hereby certify that the property in question is not part of an enhanced voluntary agricultural district agreement.

I choose not to indicate my eligibility status. I understand that I will not be considered for special cost share rates available to qualifying applicants.

Signature Date