

AMENDMENT TO CLEAN & GREEN APPLICATION

PARCEL NO. \_\_\_\_\_ DATE OF ACT 319 ENROLLMENT \_\_\_\_\_

NEW OWNERS: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PREVIOUS OWNERS: \_\_\_\_\_  
(if applicable)

CURRENT DATE: \_\_\_\_\_ Ammended Acreage \_\_\_\_\_

WITNESSETH:

THAT the undersigned, being all owners or parties in interest to the above listed parcel situated in \_\_\_\_\_  
(Township/Borough), Sullivan County Clean & Green Book and/or  
Record Book \_\_\_\_\_ at page \_\_\_\_\_,

DO HEREBY amend the preferential assessment under ACT 319 and declare that proper notice hereof  
has been given to the Sullivan County Assessment Office and that full compliance of the Act has been met.

AS A NEW OWNER in ACT 319 Clean & Green, I have read and understand the rules and regulations  
regarding ACT 319 and ACT 156; and will abide by the laws governing preferentially assessed property  
pertaining to the parcel number stated above.

IN WITNESS WHEREOF, the undersigned hereby execute this amendment for the purpose herein  
contained this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

WITNESS: \_\_\_\_\_ SIGNATURE: (Previous Owner)

\_\_\_\_\_  
COMMONWEALTH OF PENNSYLVANIA }  
COUNTY OF \_\_\_\_\_ ) SS.

On this \_\_\_\_\_ day of \_\_\_\_\_, before me, a notary public, personally appeared  
\_\_\_\_\_ known to me or satisfactorily proven to be all declared owners of the parcel above listed, whose name  
\_\_\_\_\_ subscribed to the within instrument and who acknowledge the execution hereof for  
the purposes therein contained

IN WITNESS WHEREOF, I hereunto set my hand and official seal.

WITNESS: \_\_\_\_\_ SIGNATURE: (New Owner)

\_\_\_\_\_  
COMMONWEALTH OF PENNSYLVANIA }  
COUNTY OF \_\_\_\_\_ ) SS.

On this \_\_\_\_\_ day of \_\_\_\_\_, before me, a notary public, personally appeared  
\_\_\_\_\_ known to me or satisfactorily proven to be all declared owners of the parcel above listed, whose name  
\_\_\_\_\_ subscribed to the within instrument and who acknowledge the execution hereof for  
the purposes therein contained

IN WITNESS WHEREOF, I hereunto set my hand and official seal.

APPROVED: \_\_\_\_\_  
Sullivan County Assessment Office  
by: \_\_\_\_\_ Date: \_\_\_\_\_