METROPOLITAN AGRICULTURAL PRESERVES **RESTRICTIVE COVENANT**

THIS AGREEMENT, made and entered into this	day of	20, by and between
		, Record Fee Owner(s);
	Contra	act for Deed Vendor(s) (Sellers), if any;
		et for Deed Vendee(s) (Buyers), if any;
hereinafter collectively referred to as Landowner(s); AND the		of
(NOTE: Above-named Landowner(s) must be identified a (State) Corporation, a Trustee of a Trust (describe), a whatever the case might be. If the property is homestead or not. If the property is non-homestead and spouse does legal description indicating that it is non-homestead.)	Guardian or Administra , the spouse must join wh	ntor of an Estate (describe) — hether their name is on record
WITNESSETH:		
WHEREAS, the Landowner(s) above-named are the, State of Minnesota, legally of		of land ("Land") in the County of
(If Torrens property, use the description from the Cedescription from the abstract or deed, or get it from your is needed. Be sure to state your parcel identification num	county auditor. Use an	additional sheet if extra space
Parcel I.D. No.:	1	Homestead or Non-homestead.
Legal Description:		(Circle one)
WHEREAS, the Landowner(s) desire to receive the be Agricultural Preserves Program established by Minn. Stat. ch. 47 Land described herein into a Metropolitan agricultural preserve, a	73H, and have made app	plication for initiating placement of the
WHEREAS, the Land described herein is classified as a	gricultural pursuant to M	
being eligible for designation as an agricultural preserve. A copy agricultural at the date of application is attached hereto as Attached		_ approved and certified the Land as ing that the Land is certified long-term
WHEREAS, Minn. Stat. § 473H.05 requires applicant covenant which shall constitute an easement running with the land	-	s part of their application a restrictive
NOW, THEREFORE, in consideration of receipt of the Agricultural Preserves Program, the Landowner(s), on behalf of th as follows:		
1. The Land herein described shall be kept in ag dairy animals, dairy products, poultry or poultry products, fur be forage, grains, or bees and apiary products. Wetlands, pasture a deemed to be in agricultural use.	earing animals, horticult	ural or nursery stock, fruit, vegetables,
2. The Land herein described shall be used in acc the date of this covenant.	cordance with the provisi	ons of Minn. Stat ch. 473H that exist on
3. This Restrictive Covenant shall be binding or run with the land.	n the Landowner(s), or the	neir successors and assignees, and shall
In accordance with the Americans with Disabilities Act, this informatio calling 651-201-6000. TTY users can call the Minnesota Relay Servic		

625 North Robert Street Saint Paul, Minnesota 55155-2538 651-201-6369

Minnesota Department of Agriculture

- 4. This Restrictive Covenant shall remain in full force and effect in accordance with Minn. Stat. ch. 473 until:
 - Expiration initiated by Landowner(s) pursuant to Minn. Stat. § 473H.08, subd. 2;
 - b. Expiration initiated by the Authority pursuant to Minn. Stat. § 473H.08, subd. 3;
 - Expiration over that portion of the Land a state agency or government unit purchases or takes an easement over for public trail or public park purposes pursuant to Minn. Stat. § 473H.08, subd.
 - d. Termination by executive order of the governor in the event of a public emergency pursuant to Minn. Stat. § 473H.09, subd. 1;
 - Termination following the death of the owner, owner's spouse or other qualifying person pursuant to Minn. Stat. § 473H.09, subd. 2; Termination by majority vote of the Authority pursuant to Minn. Stat. § 473H.09, subd. 3; Annexation of the Land in conformance with Minn. Stat. § 473H.14; or
 - f.

 - Acquisition of the Land by eminent domain in conformance with Minn. Stat. § 473H.15.

5.	Enforcement: This Agreement and Restrictive C	Covenant may be enforced by the		
or the State of N	Minnesota, or by an interested person, by appropriate	e action in the courts of the State	of Minnesota.	
This instrument vapproved by the M	was completed by Minnesota Department of Agriculture, 625 N. Robert St., S	St. Paul, Minnesota 55155-2538.	on a form prepare	d and
	TITNESS HEREOF, the parties to this agreement have ten. (To be signed in the presence of a notary public			year
Witnessed Sign	nature of Record Fee Owner(s):			
Witnessed Sign	nature of Contract for Deed Vendor(s) (Sellers), if an	<u>ıy:</u>		
Witnessed Sign	nature of Contract for deed Vendee(s) (Buyers) if any			
Witnessed Sign	nature of Contract for deed vendee(s) (buyers) if any	<u>y.</u>		
	nature and Title of Public Officer: of		_ County, Minnesota	
For Individual	or Husband/Wife:			
State of County of)) SS)			
The forego	oing instrument was acknowledged before me this _	day of	, 20	_, by
(Print or type e.	xact same name(s) with marital status or identity as	on page 1.)		
		Signature of Notary Public Commission Expires		
For Individual	or Husband/Wife:			
State of)) SS			
County of)			
The forego	oing instrument was acknowledged before me this _	day of	, 20	_, by
(Print or type e.	xact same name(s) with marital status or identity as	on page 1.)		
		Signature of Notary Public Commission Expires		

Minnesota Department of Agriculture 625 North Robert Street Saint Paul, Minnesota 55155-2538 651-201-6369

AG-03384 10/15/2019

For Individual or Husband/Wife	<u>e:</u>		
State of)		
County of) SS)		
The foregoing instrument	was acknowledged before me this _	day of	, 20, by
(Print or type exact same name	(s) with marital status or identity as	on page 1.)	
		Signature of Notary Public Commission Expires	
For Public Officer:			
State of)		
County of) SS)		
•	was acknowledged before me this _	day of	, 20 , by
	, the		
(Print name)	(Title)		(Local Authority)
		Signature of Notary Public Commission Expires	
For Corporation:			
State of)		
County of) SS)		
•	was acknowledged before me this _	day of	, 20
	, its		
its	of	, a	
Corporation, on behalf of the C	orporation.		
		Signature of Notary Public Commission Expires	
For Corporation:			
State of)		
County of) SS		
	was acknowledged before me this _	day of	, 20
	, its		
its	of	, a	
Corporation, on behalf of the C	orporation.		
		Signature of Notary Public Commission Expires	
For Partnership:			
State of)		
County of) SS		
•	was acknowledged before me this _	day of	, 20
on behalf of the partnership.			
		Signature of Notary Public Commission Expires	

For Partnership:			
State of)) SS		
County of)		
The foregoing instrument was	acknowledged before me this _	day of	, 20
by	, partner	of	a partnership,
on behalf of the partnership.			
		Signature of Notary Public Commission Expires	
For Attorney-in-Fact:			
State of)) SS		
County of)		
The foregoing instrument was	acknowledged before me this _	day of	, 20
by	, as attorney-in-	fact on behalf of	
		Signature of Notary Public Commission Expires	
For Trustee or Personal Representat	ive:		
State of)) SS		
County of)		
The foregoing instrument was	acknowledged before me this _	day of	, 20
by	, the	of the	
		Signature of Notary Public Commission Expires	

ATTACHMENT A

APPLICATION FOR INITIATING PLACEMENT OF LAND INTO A METROPOLITAN AGRICULTURAL PRESERVE

LO	CAL AUTHORITY:	_ and	
			(if applicable)
1.	PRINT OR TYPE NAME(S) AND ADDRESS(ES) OF RECORD (Use this space only if applicable. Must be same names as on page		Owner(s) is ("X" one): Individual Legal Guardian Family Farm Corporation Other (Specify)
2.	PRINT OR TYPE NAME(S) AND ADDRESS(ES) OF CONTRA (Use this space only if applicable. Must be same names as on page		UYER(S) (VENDEES)
3.	PRINT OR TYPE NAME(S) AND ADDRESS(ES) OF CONTRA (Use this space only if applicable. Must be same names as on page		ELLER(S) (VENDORS)
4.	BASIS OF ELIGIBILITY OF LAND ("X" one):		
	 □ 40 or more acres of land. □ Non-contiguous parcels of at least ten acres each; parcels farm □ 35-acre parcel, bound by public right-of-way or perturbation □ 20-acre parcel, subject to the conditions of Minnesota Statute 	in the rectangular su	
5.	TOTAL ACRES:		
6.	TYPE OF PROPERTY ("X" one): ☐ Abstract ☐ Registered (Torrens). If "Torrens" property, include your Ow	ner's Duplicate Cer	tificate of Title.

In accordance with the Americans with Disabilities Act, this information is available in alternative forms of communication upon request by calling 651-201-6000. TTY users can call the Minnesota Relay Service at 711. The MDA is an equal opportunity employer and provider.

(Must be thirty days after the date in No. 7 above.)

ATTACHMENT B

AFFIDAVIT OF "AUTHORITY"

ST	ATE OF MINNESOTA)	
COUNTY OF)) SS)	
		_, being first duly sworn upon o	ath deposes and says as follows:
1.	I am the(Title or Position of Local	ofof	,
	State of Minnesota, which unit of gland described herein, and constitute Section 473H.02, Subd. 4.	government exercises the plannin	g and zoning authority for the
2.	This affidavit is being executed and	d submitted on behalf of the Auth	nority.
3.	The tract of land in the County of legally described as (must be same	as on page 1):	, State of Minnesota
	Parcel identification number: Legal Description:		Homestead or Non-homestead. (Circle one)
	is, as of, 20 with a resolution adopted by the Au eligible for designation as an agricu Section 473H.04.	athority on	_, 20, is certified and
4.	This affidavit is submitted at the refor the purpose of making applicati accordance with Minn. Stat., Chapt	on for designation and creation of	(Applicant) of an agricultural preserve in

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Dated		, 20			
		S	ignature:	of	
				(Title or Position of Local Authority)	
Subscribed an	d sworn to before me				
this	day of	, 20			
Signature of Note	ary Public		 		
Commission E	Expires			_	

NOTICE BY AUTHORITY INITIATING EXPIRATION OF METROPOLITAN AGRICULTURAL PRESERVE

Pursuant to Minn. Stat. § 473H.08, subd. 3, the undersigned Authority hereby initiates expiration of the agricultural preserve and covenant identified herein. The date of expiration set forth herein is at least eight years after execution and notarization of this notice.

LC	OCAL AUTHORITY:	and	
			(if applicable)
1.	PRINT OR TYPE NAME(S) AND ADDRES (Use this space only if applicable.)	SS(ES) OF RECORD FEE OW	NER(S):
			Owner(s) are ("X" one): Individual(s) Legal Guardian Family Farm Corporation Other (Specify):
2.	PRINT OR TYPE NAME(S) AND ADDRES (Use this space only if applicable.)	SS(ES) OF CONTRACT FOR	DEED BUYER(S) (VENDEES):
3.	PRINT OR TYPE NAME(S) AND ADDRES (Use this space only if applicable.)	SS(ES) OF CONTRACT FOR	DEED SELLER(S) (VENDORS):
4.	TYPE OF PROPERTY ("X" one): ☐ Abstract ☐ Registered (Torrens)		
5.	COMPLETE LEGAL DESCRIPTION OF Certificate of Title, verbatim. If Abstract propyour county auditor. Use an additional sheet number and whether or not your property is h	perty, use the description from if extra space is needed. Be su	the abstract or deed, or get it from
	Parcel I.D. Number:	Homes	stead or Non-homestead.
	Legal Description:		(Circle one)
6	TOTAL ACRES:		

In accordance with the Americans with Disabilities Act, this information is available in alternative forms of communication upon request by calling 651-201-6000. TTY users can call the Minnesota Relay Service at 711. The MDA is an equal opportunity employer and provider.

7.	NOTICE INITIATING EXPIRATION.
	This is to notify the Landowner(s) that the parcel(s) of land described herein shall be taken out of metropolitan
	agricultural preserve status on the date specified in No. 8 because the land has been certified by resolution of
	the Authority and by appropriate maps (forwarded to the Metropolitan Council) to be no longer eligible to be an

agricultural preserve, as evidenced by zoning which will allow more than one residential unit per quarter/quarter section (40 acres). Notice of this decertification has appeared in a newspaper having general circulation within the jurisdiction of this authority, and it shall be provided to Landowner(s) by registered mail.

	of	
(Signature and Title or Posit	tion of Local Authority)	
State of)	
) SS	
County of)	
The foregoing instrume	ent was acknowledged before me this day of	, 20_
by	(Name and Title), of	
	G. CM. D.H.	
	Signature of Notary Public	
	Commission Expires	
DATE OF EXPIRATION	ON OF AGRICULTURAL PRESERVE:	
	after notarized data in No. 7)	

(Must be at least eight years after notarized date in No. 7.)