### Description of Enrolled Lands

<table>
<thead>
<tr>
<th>Contains Approximately X acres</th>
</tr>
</thead>
<tbody>
<tr>
<td>50 acres</td>
</tr>
</tbody>
</table>

### Terms and Conditions

1. **Agricultural Use**: The term "agricultural use" when used in this Agreement shall have the same meaning as in s. 91.01(1), Wis. Stats.

2. **Property**: The term "property" when used in this Agreement shall have the same meaning as in s. 91.01(7), Wis. Stats.

3. **Parcel**: The term "parcel" when used in this Agreement shall have the same meaning as in s. 91.01(8), Wis. Stats.

4. **County Name**: The term "county" when used in this Agreement shall have the same meaning as in s. 91.01(9), Wis. Stats.

5. **State of Wisconsin**: The term "state" when used in this Agreement shall have the same meaning as in s. 91.01(10), Wis. Stats.

6. **Department**: The term "department" shall have the same meaning as in s. 91.01(12), Wis. Stats.

### Additional Notes

- **First eligible tax year**: [Insert date]
- **Effective**: [Insert date]
- **Expiration**: [Insert date]

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**WITNESSETH:**

WHEREAS, the Owner owns real property in the County of [County Name] State of Wisconsin, hereinafter referred to as the “Subject Property”, which is described as follows:

**Description of Enrolled Lands**

CONTINUED ON (EXHIBIT "A")
This Instrument was drafted by the Wisconsin Department of Agriculture, Trade & Consumer Protection

STATE OF WISCONSIN
TO BE KNOWN TO BE THE PERSON(S) who executed the foregoing instrument and acknowledged the same.

___________________________________________________________

SIGNATURES TO BE ACKNOWLEDGED BY NOTARY PUBLIC:

INDIVIDUAL ACKNOWLEDGMENT (Landowner, Except Corporations)

STATE OF WISCONSIN )
County )

Personally came before me, this day of , 20___, the above named

Notary Public, Wisconsin County
My Commission Expires__________

INDIVIDUAL ACKNOWLEDGMENT (Landowner, Except Corporations)

STATE OF WISCONSIN )
County )

Personally came before me, this day of , 20___, the above named

Notary Public, Wisconsin County
My Commission Expires__________

DEPARTMENT ACKNOWLEDGMENT (Official Use Only)

STATE OF WISCONSIN )
COUNTY OF DANE )

This instrument was acknowledged before me on , 20XX by Name, as Section Chief of the Department of Agriculture, Trade and Consumer Protection on behalf of the State of Wisconsin.

Notary Name
Notary Public, Dane County, Wisconsin
My Commission Expires________

This Instrument was drafted by the Wisconsin Department of Agriculture, Trade & Consumer Protection

AD-12-42 (Rev 9/00)