



Polk County Environmental Lands Program Site Nomination Form

Please return all completed forms to Parks & Natural Resources
4177 Ben Durrance Road, Bartow, FL 33830, Fax: 863-534-7374 or
Email: tabithabiehl@polk-county.net

Site Name:

CONTACT INFORMATION

Name: Telephone No:
Property Owner as listed on Deed/Property Appraisers:
Address: Email:
City: State: Zip:

LANDOWNER'S AGENT/ REPRESENTATIVE

Agent/Representative Name:
Telephone No:
Email:

SITE LOCATION

Street Address of Property (if available):

Parcel Identification No. (if known):

Other Location Details:

Approximate Size of Property (acres):

Description of property / resources:

(Briefly describe this property's features, including any existing structures on the site; please be specific.)

Asking Price of Property (if not known, put N/A)

Willingness To Sell:

The owner/representative(s) of the property described on this form authorize(s) Polk County to evaluate their property for potential purchase in the Environmental Lands Program. If the Board of County Commissioners authorizes staff to pursue acquisition of the property, the owner(s) is/are willing to consider an offer for the purchase of the land or the rights regarding the property. The owner(s) is/are under no obligation to accept said offer or to withhold this property from other purchase offers or development during the review period. However, the owner(s) affirm that currently there is no right of first refusal, option or any other contractual agreement affecting ownership pending on this property. Polk County reserves the right to withdraw this application if the owner causes any material changes to the environmental significance and/or characteristics of the property or enters into any contractual agreement affecting ownership with another party.

An owner of record must sign this form below or submit a separate letter indicating their willingness to sell. Owner signature(s) also authorizes Polk County staff, and authorized representatives to visit the site upon due notice to the owner(s). Please attach a separate sheet if there are more than two owners of record.

Date:

Print Name:

Signature:

FOR OFFICE USE ONLY LOG No. EL _____ - _____