

COMMONWEALTH OF VIRGINIA,

CITY/COUNTY OF _____, to-wit:

**AFFIDAVIT OF INCOME ELIGIBILITY FOR THE
LOUDOUN COUNTY CONSERVATION EASEMENT ASSISTANCE PROGRAM
(Limited Liability Company - LLC)**

I _____, [name of person signing] the undersigned Affiant, who after having been duly sworn, states as follows:

1. I am _____ [title] of _____ [name of Organization] (the "Organization"), which is an entity that qualifies as a "Holder" in accordance with Virginia Code § 10.1-1009.
2. _____ [name of LLC] (the "LLC" or "Property Owner") is the owner in fee simple of real property situated, in Loudoun County, Virginia described as follows:

PIN(s) _____

Address _____

(hereinafter referred to as the "Property").

3. I am familiar with the eligibility requirements, including income, for the Loudoun County Conservation Easement Assistance Program (the "Program"). I have reviewed the appropriate documentation and otherwise taken steps as necessary to confirm that Property Owner meets all eligibility requirements of the Program as set forth more particularly below.
4. The following individual(s) are the members (collectively the "members") of the LLC:
 - a. _____ [list the names of all members of the LLC]
 - b. _____ [add more if needed].
5. I have verified that all members of the LLC are natural persons, and there are no members of the LLC other than the persons listed above.

6. I have verified that all members of the LLC [NAMES OF MEMEBERS HERE] are related to each other by blood, adoption, or marriage. If all members are related to each other by blood, adoption or marriage, the Property Owner qualifies as a “family” LLC, as defined in the Program requirements.

7(a). I have verified that the adjusted gross income (“income”) of each member is at or below \$500,000, with the highest income excluded, and, therefore, the Property Owner meets the income eligibility requirements of the Program.

[OR]

7(b). I have verified that the adjusted gross income (“income”) of each member is at or below \$500,000, and, therefore, the Property Owner meets the income eligibility requirements of the Program

8. I understand that this affidavit is made for the purposes of inducing the Board of Supervisors of the County of Loudoun, Virginia, to provide conservation easement assistance.

Given under my hand this ___ day of _____, 20_____

Signature

Type/Print Name

Subscribed and sworn to before me this ___ day of _____, 20___ by _____, Affiant, who is known to me or whose identity was satisfactorily proven before me.

Notary Public

Notary Registration No. _____

My commission expires: _____