

# SESQUICENTENNIAL FARMS PROGRAM RE-CERTIFICATION APPLICATION

Note which you are requesting (*check one or both, please*):

**New sign**   and/or    **New certificate**

Name(s) of owner(s) when farm was originally certified: \_\_\_\_\_

Last Name Representing the Family Farm: \_\_\_\_\_

Name(s) of Present Owner: \_\_\_\_\_

Address / Location of Centennial Farm: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Township Name: \_\_\_\_\_ County: \_\_\_\_\_

Original Purchase Date: \_\_\_\_\_ Original acreage: \_\_\_\_\_ Present acreage: \_\_\_\_\_

Name(s) to appear on certificate: \_\_\_\_\_

Legal Description of Land: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

In order to update our information about the farm, please list all lineal ancestor owners, beginning with the original and continuing to the present owner

Date	Name	Relationship to Present Owner
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

I do hereby certify that I am the owner of the above legally described farm that was previously certified as a Sesquicentennial Farm, and as such, said farm is still in the same family of lineal descendants. I further attest that the above information is true and correct.

\_\_\_\_\_

Signature of Owner \_\_\_\_\_  
Date

To whom should the Department address its correspondence, sign and/or certificate?

Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ E-mail address: \_\_\_\_\_

Please enclose your check in the amount of \$50.00, payable to the "Centennial Farms Signs Fund", to cover the cost of the sign and return to: **Centennial Farms Program, Illinois Department of Agriculture, Marketing and Promotion, P.O. Box 19281 - State Fairgrounds, Springfield, Illinois 62794-9281** Phone: 217/557-6993, [agr.centfarms@illinois.gov](mailto:agr.centfarms@illinois.gov)