

**MEMORANDUM OF UNDERSTANDING
BETWEEN
COUNTY OF MECKLENBURG
AND
TOWN/CITY OF _____, NORTH CAROLINA**

This MEMORANDUM OF UNDERSTANDING is hereby made and entered into by and between the County of Mecklenburg, hereinafter referred to as the County, and the Town (City) of _____, hereinafter referred to as the Municipality.

A. PURPOSE:

The purpose of this memorandum is to continue to develop and expand a framework of cooperation between the County and the Municipality, as authorized by N.C. Gen. Stat. § 160A-460 through 160A-466 and N.C. Gen. Stat. § 153A-11 to allow for the creation and administration of a mutually beneficial Voluntary Agricultural District Program and Enhanced Voluntary Agricultural District Program.

B. STATEMENT OF MUTUAL BENEFIT AND INTERESTS:

Both the County and the Municipality have recognized the need to promote agricultural values and the general welfare of their communities and, specifically, increase identity and pride in the agricultural community and its way of life; encourage the economic and financial health of agriculture, horticulture and forestry; and increase protection from non-farm development and other negative impacts on properly managed farms; and have therefore agreed that the County shall operate, through a delegation of the Municipality's authority, a Voluntary Agricultural District and Enhanced Voluntary Agricultural District Programs within the boundaries of the Municipality, according to the terms set forth in the Mecklenburg County Voluntary and Enhanced Voluntary Agricultural District Ordinance, without regard to any provision of that Ordinance to the contrary.

C. RESPONSIBILITIES

THE COUNTY AND MUNICIPALITY SHALL:

1. Benefits: Ensure that farmland, horticultural land, and forestland either now within municipal limits of the Municipality, or within such limits as the result of annexation, shall be able to participate in the Mecklenburg County Voluntary Agricultural District and Enhanced Voluntary Agricultural District programs with the full benefits accorded to other participants;
2. Appointment: Permit appointment of a member actively engaged in agriculture, selected by the Municipality, to the Mecklenburg County Agricultural Advisory Board; and
3. Termination: Permit either the Municipality or the County to withdraw from this arrangement with sixty (60) days' notice to the Mecklenburg County Agricultural Advisory Board, or other designee of the County. Termination of this arrangement will terminate the

eligibility of farms within town or City corporate boundaries to take part in the Voluntary Agricultural District program.

D. CONTACTS AND ACKNOWLEDGEMENT

1. PRINCIPAL CONTACTS. The principal contacts for this instrument are:

County Contact:

Name _____
Phone _____
Fax _____
E-mail _____

Municipality Contact:

Name _____
Phone _____
Fax _____
E-mail _____

2. NON-FUND OBLIGATING DOCUMENT. This instrument is neither a fiscal nor a funds obligation document. Any endeavor or transfer of anything of value involving reimbursement or contribution of funds between the parties to this instrument will be handled in accordance with applicable laws, regulations, and procedures including those for government procurement and printing. Such endeavors will be outlined in separate agreements that shall be made in writing by representatives of the parties and shall be independently authorized by appropriate statutory authority. This instrument does not provide such authority. Specifically, this instrument does not establish authority for noncompetitive award to the cooperator of any contract or other agreement. Any contract or agreement for training or other services must fully comply with all applicable requirements for competition.
3. COMMENCEMENT/EXPIRATION DATE. This instrument is executed as of the date of last signature and is effective in perpetuity, unless terminated in accord with the above termination provision.

IN WITNESS WHEREOF, the parties hereto have executed this agreement as of the last written date below.

County Representative:

By: _____ Date: _____
Title: _____

Municipality Representative:

By: _____ Date: _____
Title: _____