

APPLICATION FOR AGRICULTURAL USE ASSESSMENT
THIS PROPERTY MAY BE SUBJECT TO LIENS FOR UNDETERMINED AMOUNTS
 (PLEASE READ CAREFULLY THE ATTACHED INFORMATION AND INSTRUCTION SHEET)

Leslie Boucher
 COUNTY RECORDER
by Deborah Lewis
 Deput

NOTE: If necessary, attach extra pages.

Pursuant to Nevada Revised Statutes, Chapter 351.A (I) (We),

Michael Heizer

Mary Heizer

(Please print or type the name of each owner of record or his representative)

Hereby make application to be granted, on the below described agricultural land, an assessment based upon the agricultural use of this land.

(I) (We) understand that if this application is approved, it will be recorded and become a public record, this agricultural land consists of 34 Acres, is located in Lincoln County, Nevada and is described as

6-161-11 (Assessor's Parcel Number (s))

Legal description

Parcel 2 of the Heizer Parcel Map, Section 14 T2N R58E, District 5.0

(I) (We) certify that the gross income from agricultural use of the land during the preceding calendar year was \$5,000 or more. Yes No If yes, attach proof of income.

1970

(I) (We) have owned the land since

1998

(I) (We) have used it for agricultural purposes since _____ The agricultural use of the land presently is (i.e. grazing, pasture, cultivation, dairy, etc.)

Grazing, cultivation, feed-lot

Was the property previously assessed as agricultural No If so, when _____

(I) (We) hereby certify that the foregoing information submitted is true, accurate and complete to the best of (my)(our) knowledge. (I) (We) understand that if this application is approved, this property may be subject to liens for undetermined amounts. (I)(We) understand that if any portion of this land is converted to a higher use, it is our responsibility to notify the assessor in writing within 30 days. (Each owner of record or his authorized representative must sign. Representative must indicate for whom he is signing, in what capacity and under what authority.) Please print name under each signature.

Signature of Applicant or Agent

Date

Address

Phone Number

Signature of Applicant of Agent

Date

Address

Phone Number

Signature of applicant or agent

Date

Address

Phone Number

FOR USE BY THE COUNTY ASSESSOR OR DEPARTMENT OF TAXATION

Date application received 05/10/2004 WTH
(Initial)
Date property inspected (If applicable) 05/12/2004 WTH
(Initial)
Date income record inspected (If applicable) 05/12/2004 WTH
(Initial)
Approved Denied 05/13/2004 WTH
(Date) (Initial)
Written notice of approval or denial sent to applicant 05/13/2004 WTH
(Date) (Initial)
If approved, application recorded: 05/13/2004 WTH
(Date) (Initial)

Department of Taxation
application returned to assessor for valuation and entry on the roll.

(Date) (Initial)

Reasons for approval or denial and other pertinent comments:

The Cattle and Hay Operation Together Crosses \$5860.97 which makes the \$5000.00 Cross needed for agricultural Assessment.

William V. Wood
(Signature of Assessor or Department Employee Processing Application)

Assessor
(Title)

May 13, 2004
(Date)