TH

Recording requested By LINCOLN COUNTY ASSESSOR

Lincoln County - NV Leslie Boucher - Recorder

Fee

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Return this application to:

Agricultural Use Assessment Application

REVIEW THE ATTACHED INSTRUCTION SHEET FOR DIRECTIONS ON HOW TO FILL OUT THIS FORM. IF MORE SPACE IS NEEDED, PLEASE ATTACH ADDITIONAL SHEETS AS NECESSARY TO THIS APPLICATION.

1.) Please type in the name and address of each owner of record or his representative:

Owner: KEND CLORCLNER Owner: Patrick Gloeckner	P
Address: HC-74 Box 237 Address: HC 74 Box 237	
City/State/Zip: Pioche, No. 89043City/State/Zip: Pioche, NV 89043	
2.) What is the size of the subject parcel? 48.499	
(Parcels less than 20 acres will be referred to the Department of Taxation for approval).	
3.) APN (Assessor's Parcel Number): $006-271-36$	
4.) Legal Description:	_
Begining Q Southwest corner of the Now YANEY4 offec. IS, T. IN R. COFE,	MDO
Then North along west line of NWY4 NEY4 of and See 15 projecting 24-56 to	٠ >٥،،
and the west line of Sun Van St. Van of See 100 TIN ROYF to It will be allowed a	250
670 TS extracts to Corner of Ser. 10 & then WES 1320' to 3'W corner of SEVASEVA	10
3) Was the gross income from agricultural use of the land during the preceding calendar year	
\$5,000 or more? Yes No south 1320 to Secorner o	ም 12.
If yes, attach proof of income.	
Then Boo's your	. S /
6.) Date the property was originally placed in service by the owners listed above for agricultural 7	nnec ac-
purposes $10/30/201$	3e4
	· 1
7.) The agricultural use of the land is (i.e., grazing, pasture, cultivated, dairy, etc.)	
GRAZINA FARMINA Pastora	
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
8.) Was this property previously assessed as agricultural? VS	

S:\Div - DOAS\Locally Assessed\Forms Proposed\Ag Application 4-02.doc

assessed as agricultural? 2006-2007

The undersigned hereby certify the foregoing information submitted is true, accurate and complete to the best of (my) (our) knowledge. (I) (We) understand 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 of the conversion.

EACH OWNER OF RECORD OR HIS AUTHORIZED REPRESENTATIVE MUST SIGN BELOW. IF SIGNED BY A REPRESENTATIVE, THE REPRESENTATIVE MUST INDICATE FOR WHOM HE IS SIGNING, HIS CAPACITY, AND UNDER WHAT AUTHORITY. PLEASE TYPE THE NAME UNDER EACH SIGNATURE.

San Blocknu			12-12-11
Signature of Applicant or Agent	Capacity	Authority	Date
Kena Gloeckner			
Print Name of Applicant or Agent HC-74 Box 237		775 96	2 5493
Address Pioche Neurola 89	013	Phone Number	
Signature of Applicant or Agent	Capacity	Authority	Date
Print Name of Applicant or Agent	41/ 10 / 10	474	-10
1 4074 Box 237 · Proche.	71V 84043	775-962	5493
Address	_ \ \ \	Phone Number	12-12-11
Signature of Applicant or Agent	Capacity	Authority	Date
Putnck Gloeckner Print Name of Applicant or Agent 2HC-74 Box 237			
Address		Phone Number	
Attach additional signatures as neces	sarv		

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FOR USE BY THE COUNTY ASSESSOR OR DEPARTMENT OF TAXATION

Æ	Application Received	1-3-2012	mm
	Property Inspected	Date 1-3-70/2 Date	Initial Initial
ø	Income Records Inspected:	1-3-2012	mina Initial
A	Written Notice of Approval or Denial Sent to Applic	cant 1-3-2012 Date	Initial
	Application forwarded to Department of Taxation	Date	Initial
	Department of Taxation returned application	Date	Initial
easons	for Approval or Denial and Other Pertinent Commen		miliai
Th	5 Parcel will e	asily C	21055 tho
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