2018-154204

Total:\$0.00

05/21/2018 03:21 PM

THIS LINCOLN COUNTY ASSESSOR

OFFICIAL RECORD LESLIE BOUCHER, RECORDER

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 Andrew Ed III
Owner: Andrew F. Laura Lytle Address: 2995 S. River rd. Address: 2995 S. River rd.
Address: 2995 S. River rd. Address: 2995 S. River rd.
City/State/Zip: 5+ Ceorge, O+ City/State/Zip: 5+ Geo. Utah 84790
2.) What is the size of the subject parcel? 106.500 acres
(Parcels less than 20 acres will be referred to the Department of Taxation for approval).
and a special of induction for approvary.
3.) APN (Assessor's Parcel Number): 014-070-02
() T 1D 1
4.) Legal Description:
next page
5.) Was the gross income from agricultural use of the land during the preceding calendar year
\$5,000 or more? Yes No No
If yes, attach proof of income.
6.) Date the property was originally placed in service by the owners listed above for agricultural
purposes <u>5-11-18</u>
7.) The agricultural use of the land is (i.e., grazing, pasture, cultivated, dairy, etc.)
pasture
3.) Was this property previously assessed as agricultural? If yes, when was it
ussessed as agricultural?
ssessed as agricultural? Yes years great-grandfather
great-grand-ather
J

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.

	Owner		
Signature of Applicant or Agent	Capacity	Authority	Date
Oul Fhyle	//_	/ /	
Print Name of Applicant of Agent)	
Andrew F. Lytle		435-680	32 97
Address 2995 5. River	rd.	Phone Number	
St. George, Ut	,84790	V /	- 1:
	owner		5-11-18
Signature of Applicant or Agent	Capacity	Authority	Date
Jama Lytha			
Print Name of Applicant or Agent			
haura hytle		435-619	<u>-5167</u>
Address 2995 SURIVER TO	. \ \	Phone Number	
St. George, Utah	81790		
	Owner		5-11-18
Signature of Applicant or Agent	Capacity	Authority	Date
	//	المراجع المستعدد المستعدد المستعدد	
Print Name of Applicant or Agent			
Address		Phone Number	
_			

Attach additional signatures as necessary.

FOR U	JSE BY THE COUNTY ASSESSOR OR DI	EPARTMENT	OF TAXATION		
×	Application Received	5-15-2018	MY		
X	Property Inspected	Date 4- 4- 2018 Date	Initial .		
	Income Records Inspected:	Date	Initial Initial		
0	Written Notice of Approval or Denial Sent to Applic		Initial		
Q	Application forwarded to Department of Taxation	Date	Initial		
	Department of Taxation returned application	Date	Initial		
	for Approval or Denial and Other Pertinent Commer	its:	Cover the 5,000 00		
	ying in The RAnching Fam				
Mark R Hall					
Signatur	e of Official Processing Application				

5-21-2018 Date

<u>A55E55on</u> Title