

Pursuant to SB 167, 1975 Statutes of Nevada, Chapter 749 (I) (We),  
M. Van Vliet and Sons, Inc.

15151 South Brennan Road

Escalon, CA 95320

(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 689.76 acres, is located in Eureka  
County, Nevada and is described as 07 340 20  
(Assessor's Roll or Parcel Number(s))

Legal description, Lots 1,2,3,4,5,6,7, & 11; NW1/4NW1/4 Section 28 T20NR53E  
Lots 3,4,5,6,12,13,14,15 Section 21 T20NR53E

(I) (We) certify that the gross income from agricultural use of the land during the preceding calendar year was \$2,500 or more. Yes ☐ No ☐ If yes, attach proof of income.

(I) (We) have owned the land since \_\_\_\_\_

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

Was the property previously assessed as agricultural? ☐ Is so, when? \_\_\_\_\_

If the land was not previously classified as agricultural, how is it now being prepared to qualify for agricultural assessment? \_\_\_\_\_

When did preparation begin to convert property to agricultural use? \_\_\_\_\_

Will the projected income on this property be \$2,500 or more? ☐  
If yes, describe the projected operation and include projected income calculation. \_\_\_\_\_

(I) (We) hereby certify that the foregoing information submitted is true, accurate and complete to the best of (my) (our) knowledge. (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, and attach written proof of his authority.)

M. Van Vliet President Aug 10 - 1981 Date  
Signature of Applicant or Agent  
15151 Brennan Ave Escalon Cal 95320 209-838-7065 Phone Number  
Address

Signature of Applicant or Agent \_\_\_\_\_ Date \_\_\_\_\_  
Address \_\_\_\_\_ Phone Number \_\_\_\_\_

Signature of Applicant or Agent \_\_\_\_\_  
Address \_\_\_\_\_

Signature of Applicant or Agent \_\_\_\_\_  
Address \_\_\_\_\_

Signature of Applicant or Agent \_\_\_\_\_  
Address \_\_\_\_\_

Signature of Applicant or Agent \_\_\_\_\_  
Address \_\_\_\_\_

ASD 11

MAIL TO:  
Eureka County Assessor  
P. O. Box 244-88  
Eureka, NV. 89316

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RECORDED AT REQUEST OF  
James P. Theriault  
BOOK 99 PAGE 310

81 NOV 6 9:05

OFFICIAL RECORDS  
EUREKA COUNTY, NEVADA  
WILLIS A. DEPAOLI, RECORDER  
FILE NO. 82408  
FEE \$ No fee