

91403

APPLICATION FOR AGRICULTURAL USE ASSESSMENT
Note: If necessary, attach extra pages.

Pursuant to SB 167, 1975 Statutes of Nevada, Chapter 749 (1) (We),
James E. Groth

Verna J. Groth

(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 assess-
ment 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 317.25 acres, is located in Eureka

County, Nevada and is described as 07 200 07
(Assessor's Roll or Parcel Number(s))

Legal description, W¹ Section 2, T21NR53E

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

(I) (We) have owned the land since 1971

(I) (We) have used it for agricultural purposes since 1971
The agricultural use of the land presently is (i.e. grazing, pasture, cultivated, dairy,
etc.) Grazing, Pasture, Cultivated

Was the property previously assessed as agricultural? Yes. 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? Yes
If yes, describe the projected operation and include projected income calcula-
tion.

(I) (We) hereby certify that the foregoing information submitted is true, accurate and com-
plete to the best of (my) (our) knowledge. (Each owner of record or his authorized repre-
sentative must sign. Representative must indicate for whom he is signing in what capac-
ity and under what authority, and attach written proof of his authority.)

X James E. Groth 2-9-83
Signature of Applicant or Agent Date

Address Phone Number

X Verna J. Groth
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

ASD 11

MAIL TO:

J. P. Itharralde
Eureka County Assessor
P. O. Box 88
Eureka, NV. 89316

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FEB 8 1983

RECORDED AT REQUEST OF
James Itharralde
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OFFICIAL RECORDS
EUREKA COUNTY, NEVADA
M.N. REBALEAL, RECORDER
FILE NO. 91403
F.F.S. No Fee

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