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EURENA COUNTY

APPLICATION FOR ACRICULTURAL USE ASSESSMENT

THIS PROPERTY MAY BE SUBJECT TO LIENS FOR UNDETERMINED AMOUNTS

(PLEASE READ CAREFULLY THE ATTACHED INFORMATION AND INSTRUCTION SEEET)

Note: If necessary, attach extra pages. Pursuant to Nevada Revised Statutes, Chapter 361.A (I) (We), Perry H. Burnham Madeline A. Burnham (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 640 acres, is located in Eureka County, New acres, is located in Eureka County, Nevada and is (Assersor's Parcel Mumber(s))
Legal description All Section 8 T218, R54E (I) (We) certify that the gross income from agricultural use of the land during the preceding calendar year was \$2,500 or more. Yes \(\sum_{\text{No}}\) No \(\text{No}\) . If yes, attach proof of income. patent Since about 1947. Your records will show this. (I) (We) have owned the land since . The agricultural use of Sirce Patent date (I) (We) have used it for agricultural purposes since the land presently is (i.e. grazing, pasture, cultivated, dairy, etc.) yes . If so, when Was the property previously assessed as agricultural_ 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. alfalfa hau (I) (We) hereby certify that the foregoing information submitted is true, accurate and complete to the best of (my) (1) (We) understand that if this application is approved, this property may be subject to liens (Each owner of record or his authorized representative must sign. Representative must what capacity and under what authority.) Please print name under each indicate for orko signaturé. KOBE 702 Recorder's Stamp of Applicant or Agent Phone Date Signature of Applicant or Agent Phone # Address

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