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## APPLICATION FOR AGRICULTURAL USE ASSESSMENT

EUREKA COUNTY  
J. P. ITHURRALDE, ASSESSORTHIS PROPERTY MAY BE SUBJECT TO LIENS FOR UNDETERMINED AMOUNTS

(PLEASE READ CAREFULLY THE ATTACHED INFORMATION AND INSTRUCTION SHEET)

Note: If necessary, attach extra pages.

Pursuant to Nevada Revised Statutes, Chapter 361.A (1) (We),

Orrain C. TallcottLucille Tallcott

(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 440 acres, is located in Eureka County, Nevada and is described as 07-140-29

(Assessor's Parcel Number(s))

Legal description E2;E2SW4;SE4NW4 Section 8 T22N,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 ☒ No ☐ If yes, attach proof of income.(I) (We) have owned the land since 1977-120A purchased 1978-320 purchased(I) (We) have used it for agricultural purposes since 1978-79. The agricultural use of the land presently is (i.e. grazing, pasture, cultivated, dairy, etc.)alfalfa hay  
Was the property previously assessed as agricultural yes. If 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 calculation.alfalfa hay

(I) (We) hereby certify that the foregoing information submitted is true, accurate and complete to the best of (my) (our) knowledge. (I) (We) understand that if this application is approved, this property may be subject to liens for undetermined amounts. (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.) Please print name under each signature.

Signature of Applicant or Agent	Date
<u>Orrain C. Tallcott</u>	<u>8-27-87</u>
Address <u>Orrain C. Tallcott</u>	Phone # <u>                    </u>
<u>D. Lucille Tallcott</u>	<u>DR 816, Box 44 769-0709</u>
<u>Eureka, NV 89316</u>	<u>                    </u>
Signature of Applicant or Agent	Date
<u>Lucille Tallcott</u>	<u>8-27-87</u>
Address <u>Lucille Tallcott</u>	Phone # <u>                    </u>
<u>DR 816, Box 44 Eureka, NV 89316</u>	<u>769-0709</u>
Signature of Applicant or Agent	Date
<u>                    </u>	<u>                    </u>
Address <u>                    </u>	Phone # <u>                    </u>

## Recorder's Stamp

RECORDED AT THE REQUEST OF  
EUREKA COUNTY ASSESSOR  
BOOK 170 PAGE 528

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OFFICIAL RECORDS  
EUREKA COUNTY, NEVADA  
M. H. REBALLATI, RECORDER  
FILE NO. 115317  
FEE \$ NO FEE