137944

RECEIVED

APPLICATION FOR AGRICULTURAL USE / SESSMENT
THIS PROPERTY MAY BE SUBJECT TO LIENS FOR US ETERMINED AMOUNTS
(PLEASE READ CAREFULLY THE ATTACHED INFORMATION SD INSTRUCTION SHEET)

SEP - 9 1991

EUREKA COUNTY

Note: If necessary, attach extre pages. Pursuant to Nevada Revised Statutes, Chapter 361.A (I) (We),

Stephen of fathum	
Lloyd M. Martin	
(Please print or type the name of each owner of record or his representation to be granted, on the below described agricult cultural use of this land.	ntive) ral land, an assessment based upon the agri-
(I) (Ve) understand that if this analysis is	
(I) (We) understand that if this application is approved, it will be r This agricultural land consists of 320 acres, is located in described as 07-330-02	Eureka County, Nevada and is
(Assessor's Parcel Number Legal description Lots 15 & 16; S2NE4; SE4 Section 4 T20N, R	
(I) (We) certify that the gross income from agricultural use of the	
S5,000 or more. Yes X No If yes, attach proof of income.	tand during the preceding calendar year was
(I) (We) have owned the land since	
(I) (We) have used it for agricultural purposes since Pate.	ited . The agricultural use of
the land presently is, (i.e. grazing, pasture, cultivated, Vairy, etc.) Alfalfa Craps, Dasters	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
was the property previously assessed as agricultural 2161. I	so, when Marcy Zyears
(I) (We) hereby certify that the foregoing information submitted is tr (our) knowledge. (I) (We) understand that if this application is app	2, accurate and complete to the best of (my)
for undetermined amounts. (I) (We) understand that if any portion of	his land is converted to a higher use it to
our responsibility to notify the assessor in writing within 30 days representative must sign. Representative must indicate for whom he	(Each owner of record or his authorized
authority.) Please print name under each signature.	s signing, in what capacity and under what
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Signature of Applicant or Agent	Date
	/ /
Address	Phone Number
TOCH MINOSTY.	9-9.91
Agnature of Applicant or Agent	Date
Address	Phone Number
Signature of Applicant or Agent	Date
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