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A. P. ITHURRALDE ASSESSOR

APPLICATION FOR ACRICULTURAL USE ASSESSMENT
THIS PROPERTY MAY BE SUBJECT TO LIEUS 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 (I) (We), Charles L. Bispo Lois A. Bispo (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 7667 acres, is located in Eureka County, New acres, is located in Eureka 05-140-12, 05-150-02 & 05-160-07 County, Nevada and is described as 05-140-02, 05-140-09, 05-140-11 (Assessor's Parcel Number(s)) W2; W2SE4; SE4SE4; SW4NE4 Section 18; All Section 19; SW4NE4; W2; W2SE4 Legal description W2;W2SE4;SE4SE4;SW4NE4 Section 18; All Section 19; SW4NE4;WZ;WZSE4 Section 20; All Section 29 & 30; NE4;NE4SE4 Section 32 T31N,R52E; Part S. of C.P. Right-of-Way Section 3; Part of S2SE4 lying S. of C.P. Pight-of-Way Section 9; All Sections 12,13,14,23,24,25 &26; S2NW4 Section 15; E2XE4 Section 27 T31N,R51E. (I) (We) certify that the gross income from agricultural use of the land during the preceding calendar year was \$5,000 or more. Yes / No . If yes, attach proof of income. (I) (We) have owned the land since Acquires (I) (We) have used it for agricultural purposes since DATE . The agricultural use of If so, when (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. (I) (We) understand that if any portion of this land is converted to a higher use, it is our responsibility to notify the assessor in writing within 30 days. (Each owner of record or his authorized representative must sign. Representative must indicate for whom he is signing, in what capacity and under what Please print name under each signature. of Applicant or 754-2355 Phone Number Sept 11, 1991 Signature of Applicant or Agent Date 754-2355 788 Phone Sumber Signature of Applicant or Agent Date Address Phone Number ASD OZA 07109191

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