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JUL 22 1991

APPLICATION FOR AGRICULTURAL USE ASSESSMENT

J. P. ITHURRAL P. ASSESSOR

THIS PROPERTY MAY BE SUBJECT TO LIERS 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), James W. Buffham Pamela M. Buffham (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 1,463.04 acres, is located in <u>Eureka</u> described as 07-050-04, 07-050-05, 07-050-06, 07-050-07, 07 07-050-10 (1/2 Int.) (Assessor's Parcel Number(s)) County, Nevada and is 07-050-09. Legal description NE4NE4; SW4NE4 Section 11; S2SW4 section W2NW4:SW4NW4 Section 24; NE4; E2NW4 Section 25; N2NE4; W2NW4; NW4NW4 an undivided one half interest in and to the SW4NE4; SE4NW4 Section 36 T23N,R52E: 2 Section 30 T23N R53E (1) (We) certify that the gross income from agricultural use of the land during the preceding calendar year was \$5,000 or more. Yes ho . If yes, attach proof of income. (I) (We) have owned the land since (I) (We) have used it for agricultural purposes since The agricultural use of the land presently is (i.e. grazing, pasture, cultivated, dairy, etc.) Was the property previously assessed as agricultural VES If so, when 1870 TO PRESENT (1) (We) hereby certify that the foregoing information submitted is true, accurate and complete to the best of (my) (our) knowledge. (1) (We) understand that if this application is approved, this property may be subject to liens for undetermined amounts. (1) (6) 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 authority.) Please print name under each signature. ames W. 20,1981 Signature of Applicant or Agent Date ď 154 237.5303 Address Time Signature of Applicant or Agent Date 1013 nic 237.5305 Address Phone Number Signature of Applicant or Agent Date Address Phone Number ASD OZA 07109191