

RECEIVED
SEP 14 1994
EUREKA COUNTY
THURMADE, ASST.

Application for Agricultural Use Assessment
THIS 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 (I) (We),

DON BOWMAN

(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 40.00 acres, is located in Eureka County, Nevada and is described as
T22N, R48E Sec. 21 NW4SW4
(Assessor's Parcel Number(s))

(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 May 20, 1994
(I) (We) have used it for agricultural purposes since May 20, 1994
The agricultural use of the land presently is (i.e. grazing, pasture, cultivated, dairy, etc.) grazing
Was the property previously assessed as agricultural YES. If so, when YES

(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 authority.) Please print name under each signature.

Signature of Applicant or Agent Don Bowman
Date 9/2/94
Address PO Box 1629, Fallon NV 89406
Phone Number 702/423-6197

Signature of Applicant or Agent
Date
Address
Phone Number

Signature of Applicant or Agent
Date
Address
Phone Number

BOOK 278 PAGE 224
OFFICIAL RECORDS
RECORDED AT THE REQUEST OF
Eureka Co. Auditor
94 NOV - 7 PM 1:17
EUREKA COUNTY NEVADA
M.N. REBALANCE ORDER
FILE NO.
FEES No Fee