

163254

APPLICATION FOR AGRICULTURAL USE ASSESSMENT
THIS PROPERTY MAY BE SUBJECT TO LIENS FOR UNDETERMINED AMOUNTS
(PLEASE READ CAREFULLY THE ATTACHED INFORMATION AND INSTRUCTION SHEET)
JUN 20 1996

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

ARNOLD, James E.

ARNOLD, Joy F.

(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 640 acres, is located in Eureka County, Nevada and is described as

Legal description T21N, R54E Section 20 All
(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 1994
(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 grazing. 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 authority.) Please print name under each signature.

Signature of Applicant or Agent James E. Arnold
Date June 1, 1996
Address _____
Phone Number _____

Signature of Applicant or Agent Joy F. Arnold
Date 6-1-96
Address _____
Phone Number _____

Signature of Applicant or Agent _____
Date _____
Address _____
Phone Number _____

ASD 02A
EUREKA COUNTY NEVADA
M.N. REBALANCE, RECORDER
FILE NO. _____
FEES No fee
07/09/91

BOOK 297 PAGE 294
OFFICIAL RECORDS
RECORDED AT THE REQUEST OF
Eureka County Recorder
96 JUN 20 PM 2:59

BOOK 297 PAGE 294

163254