

177009

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),

HAROLD V. ROTHER

SHIRLEY A. ROTHER

(Please print or type the name of 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 079.80 acres, is located in Eureka County, Nevada and is described as 5-570-15

Legal description	(Assessor's Parcel Number(s))
<u>SW4;SE4N</u>	<u>Section 4 T29N,R52E</u>
<u>SE4;SW4N;Lot 2</u>	<u>Section 5 T29N,R52E</u>
<u>E2</u>	<u>Section 8 T29N,R52E</u>
<u>W2</u>	<u>Section 9 T29N,R52E</u> LESS 29.48 HWRW

(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 . Yes, attach proof of income.

(I) (We) have owned the land since 2001

(I) (We) have used it for agricultural purposes since since purchased. The agricultural use of the land presently is (i.e. grazing, pasture, cultivated, dairy, etc.)

Was the property previously assessed agricultural forever. 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 signature.

X Harold Rother Signature of Applicant or Agent Oct 5-01 Date

Box 489 Cheyenne Wells, Colo Address 719-767-5762 Phone Number

X Shirley A Rother Signature of Applicant or Agent _____ Date

Address Phone Number

Signature of Applicant or Agent Date

Address Phone Number

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OFFICIAL RECORDS
RECORDED AT THE REQUEST OF
Eureka County Assessor
01 OCT -8 AM 11:28

EUREKA COUNTY NEVADA
M.N. REBALEATI, RECORDER
FILE NO. FEES None