

For more information call (775)237-5270

Agricultural Use Assessment Application

REVIEW THE ATTACHED INSTRUCTION SHEET FOR DIRECTIONS ON HOW TO
FILL OUT THIS FORM. IF MORE SPACE IS NEEDED, PLEASE ATTACH
ADDITIONAL SHEETS AS NECESSARY TO THIS APPLICATION.

RECEIVED
MAY 13 2002
EUREKA COUNTY
J.P. MORALDE, ASSESSOR

1.) Please type in the name and address of each owner of record or his representative:

Owner: GRABER, Gary Owner: GRABER, Debbie
Address: HC 62 Box 152 Address: HC 62 Box 62152
City/State/Zip: Eureka, NV 89316 City/State/Zip: Eureka, NV 89316

2.) What is the size of subject parcel? 160.00 acres
(Parcels less than 20 acres will be referred to the Department of Taxation for approval).

3.) APN (Assessor's Parcel Number): 07-440-23

4.) Legal Description: T1N, R54E Section 33 NE4

5.) Was the gross income from agricultural use of the land during the preceding calendar year
\$5,000 or more? Yes ☒ No ☐
If yes, attach proof of income.

6.) Date the property was originally placed in service by the owners listed above for agricultural
purposes 1998

7.) The agricultural use the land is (i.e., grazing, pasture, cultivated, dairy, etc.)
dry hay

8.) Was this property previously assessed as agricultural? ☒ If yes, when was it
assessed as agricultural?

The undersigned hereby certify the foregoing information submitted is true, accurate and
complete to the best of (our) knowledge. (I) (We) understand 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 of the conversion.

EACH OWNER OF RECORD OR HIS AUTHORIZED REPRESENTATIVE MUST SIGN
BELOW. IF SIGNED BY REPRESENTATIVE, THE REPRESENTATIVE MUST
INDICATE FOR WHOM HE IS SIGNING, HIS CAPACITY, AND UNDER WHAT
AUTHORITY. PLEASE TYPE THE NAME UNDER EACH SIGNATURE.

<u>Gary Graber</u>	<u>owner</u>		<u>5/10/02</u>
Signature of Applicant agent	Capacity	Authority	Date
<u>GARY GRABER</u>			
Print Name of Applicant Agent			
<u>HC 62 Box 152 Eureka, NV</u>		<u>237-7451</u>	
Address		Phone Number	
<u>Debbie Graber</u>			<u>5/10/02</u>
Signature of Applicant agent	Capacity	Authority	Date
<u>Debbie Graber</u>			
Print Name of Applicant Agent			
Address		Phone Number	
Signature of Applicant agent	Capacity	Authority	Date
Print Name of Applicant Agent			
Address		Phone Number	

Attach additional signatures as necessary.

FOR USE BY THE COUNTY ASSESSOR OR DEPARTMENT OF TAXATION

<input checked="" type="checkbox"/> Application Received	Date <u>05/13/02</u>	Initial <u>JA</u>
<input type="checkbox"/> Property Inspected	Date _____	Initial _____
<input type="checkbox"/> Income Records Inspected	Date _____	Initial _____
<input checked="" type="checkbox"/> Written Notice of Appeal or Denial Sent to Applicant	Date <u>05/13/02</u>	Initial <u>JA</u>
<input type="checkbox"/> Application forwarded Department of Taxation	Date _____	Initial _____
<input type="checkbox"/> Department of Taxation returned application	Date _____	Initial _____

Reasons for Approval or Denial and Other Pertinent Comments:

This parcel is already in agricultural use. New application
caused by date split of property.

JA
Signature of Official Processing Application
ASSESSOR
Title
05/13/02
Date

THIS SPACE FOR RECORDERS ONLY

BOOK 347 PAGE 141
OFFICIAL RECORDS
RECORDED AT THE REQUEST OF
Eureka County Assessor
02 MAY 13 AM 10:58
EUREKA COUNTY NEVADA
M.H. REBALEATI, RECORDER
FILE NO. FEES
178097

BOOK 347 PAGE 142
OFFICIAL RECORDS
RECORDED AT THE REQUEST OF
EUREKA COUNTY NEVADA
M.H. REBALEATI, RECORDER
FILE NO. FEES
02 MAY 13 AM 10:59

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