

178116

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

RECEIVED
MAY 20 2002

EUREKA COUNTY
J.P. ITHURRALDE, ASSESSOR

Note: If necessary, attach extra pages.

Pursuant to Nevada Revised Statutes, Chapter 361.A (I) (We),

BROWN FAMILY REVOCABLE TRUST

(Please print or type the name of each owner of record or his representative)

hereby make application to be assessed, 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 7,793.75 acres, is located in Eureka County, Nevada and is described as 01-160-07 (Summary Parcel #)

(Assessor's Parcel Number(s))

Legal description see attached listings

(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 Sept. 1995

(I) (We) have used it for agricultural purposes since Sept 1995. The agricultural use of the land presently is (i.e. grazing, pasture, cultivated, dairy, etc.)

grazing, pasture, cultivated
Was the property previously assessed as agricultural yes. If so, when It's always been agricultural

(I) (We) hereby certify that 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 of each signature.

BROWN FAMILY REVOCABLE TRUST by:

X Sheree W. Brown

Trustee 5-15-02

Signature of Applicant or Agent

Date

Address

Phone Number

Signature of Applicant or Agent

Date

Address

Phone Number

Signature of Applicant or Agent

Date

Address

Phone Number

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FOR USE BY THE JUNTY ASSESSOR OR DEPARTMENT OF TAXATION

application received _____ 05/20/02 _____ (Initial) *[Signature]*

property inspected (If applicable) _____ _____ (Initial)

income records inspected (If applicable) _____ _____ (Initial)

Approved Denied _____ 05/20/02 _____ (Date) _____ (Initial) *[Signature]*

written notice of approval or denial sent applicant. _____ 05/20/02 _____ (Date) _____ (Initial) *[Signature]*

approved, application recorded: _____ 05/20/02 _____ (Date) _____ (Initial) *[Signature]*

Department of Taxation:
Application returned to assessor for valuation and entry on the roll. _____ (Date) _____ (Initial)

Reasons for approval or denial and other pertinent comments:

Transferred to a Family Revocable Trust from individuals

[Signature]

(Signature of Assessor or Department Employee Processing Application)

Assessor

(Title)

05/20/02

(Date)

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OFFICIAL RECORDS
RECORDED AT THE REQUEST OF
Eureka County Assessor
02 MAY 20 PM 1:57
EUREKA COUNTY NEVADA
M.H. REBALEATI, RECORDER
FILE NO. FEES *No Fee*
07109191

178116

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