Official Record Recording requested By EUREKA COUNTY ASSESSOR APN (Assessor's Parcel Number): Eureka County - NV 08-090-02 Mike Rebaleati - Recorder Fee Page 1 Recorded By FES Book- 0458 Page- 0153 Return this application to: Eureka County Assessor 20 South Main Street P.O. Box 88 Eureka, Nevada 89316 Phone (775)237-5270 This space for Recorder's Use Only **Agricultural Use Assessment Application** Return this application to the County Assessor's Office at the address shown above no later than June 1st. If this application is approved, it will be recorded and become a public record. IF MORE SPACE IS NEEDED. PLEASE ATTACH ADDITIONAL SHEETS AS NECESSARY TO THIS APPLICATION. 1.) Please type in the following information for each owner of record or his representative. Attach additional sheets if necessary:

Owner: BAUMANN FAMILY TRUST, The Representative:

Address: P. O. Box 308

City/State/Zip: Eureka, NV 89316

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City/State/Zip: Eureka, NV 89316

City/State/Zip: City/State/Zip:

2.) Describe all the uses of the land for which you are requesting an agricultural designation, such as agricultural, residential, commercial, or industrial use (For instance, if you farm and live on this parcel, the use would be both agricultural and residential). In addition, please describe the agricultural operation. (For instance, raising crops, livestock, poultry, fur-bearing animals, bees, aquatic agriculture, hydroponic gardens.)

Cyfill tural Commercial of the land devoted to agricultural use?

4.) Is this parcel contiguous to other lands controlled by the owner and designated as agricultural? Yes No

5.) What is the date the property was originally place agricultural purposes?	d in service by the owne	rs listed above for
agricultural purposes:		
6.) Was this property previously assessed as agriculty assessed as agricultural? 1973 to free fire	ral? Test If yes,	when was it
7.) Was the gross income from agricultural use of the \$5,000 or more? Yes No		ng calendar year
8.) Please attach a statement of revenues and expense and include a copy of IRS Form F. Additional docum assessor.		
The undersigned hereby certify the foregoing information best of (my) (our) knowledge. (I) (We) understand if this appliens for undetermined amounts. (I) (We) understand that if any our responsibility to notify the assessor in writing within 30 days	lication is approved, this pro y portion of this land is conve	operty may be subject to
EACH OWNER OF RECORD OR HIS AUTHORIZED REPR BY A REPRESENTATIVE, THE REPRESENTATIVE MUS CAPACITY. AND UNDER WHAT AUTHORITY. PLEASE BAUMANN FAMILY TRUST, The by:	T INDICATE FOR WHOM	I HE IS SIGNING, HIS EACH SIGNATURE.
VERA L. BAUMANN		5-22-07
Type or Print Name Authorit	ty (i.e. Power of Attorne	
PO BOX 308 ELLREKA, NV	905 420 KJB	12 <u>775-237-54</u> 38
Address/City/State/Zip	Phone Number	FAX Number
FOR USE BY THE COUNTY ASSESSOR	OR DERARTS GENT OF TAYA	TION
Application Received	5/22/12	<u> </u>
□ Property Inspected	Date '	Initial
	Date	Initial
☐ Income Records Inspected:	Date	Initial
☐ Written Notice of Approval or Denial Sent to Applic	cant	
☐ Application forwarded to Department of Taxation	Date	Initial
/ /	Date	Initial
☐ Department of Taxation returned application	Date	Initial
Reasons for Approval or Denial and Other Pertinent Comme		
The Much	Lice Till	200 5/20/07
Signature of Official Processing Application	Title	Date