## DOC # 0213965 APN (Assessor's Parcel Number): Record Recording requested By EUREKA COUNTY ASSESSOR 07-070-02 Eureka County - NV Mike Rebaleati - Recorder Page 1 Recorded By Return this application to: Book- 493 Page- 0072 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: Joseph L. Rand & Ellen M. Rand Owner: RAND REVOCABLE LIVING TRUST Representative: Address: HC 62 Box 62140 Address: City/State/Zip: City/State/Zip: Eureka, NV 89316 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.) raising Crops, Irvestock 3.) What is the size 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 placed in agricultural purposes? 19 78   | service by the owners t  | isted above for                    |
|---|--|------------------------------------|
| 6.) Was this property previously assessed as agricultural? assessed as agricultural? Many years.  | 1 (ges, wt   | nen was it                         |
| 7.) Was the gross income from agricultural use of the land \$5,000 or more? Yes NoNoNo  | d during the preceding   | calendar year                      |
| 8.) Please attach a statement of revenues and expenses re and include a copy of IRS Form F. Additional documents assessor.  | lated to the agricultura<br>ition may be requested             | l use of the land<br>by the county |
| The undersigned hereby certify the foregoing information best of (my) (our) knowledge. (I) (We) understand if this applicat liens for undetermined amounts. (I) (We) understand that if any por our responsibility to notify the assessor in writing within 30 days of  | ion is approved, this prope<br>tion of this land is converte   | rty may be subject to              |
| EACH OWNER OF RECORD OR HIS AUTHORIZED REPRESE BY A REPRESENTATIVE, THE REPRESENTATIVE MUST IN CAPACITY, AND UNDER WHAT AUTHORITY. PLEASE TYP RAND REVOCABLE LIVING TRUST by:   | IDICATE FOR WHOM H   | E IS SIGNING, HIS                  |
| Signature of Applicant or Agent Cap   | acity (Owner, Represer   | ntative, or Lessee)                |
| Ellen M. Kand   |  | 9-1-09                             |
| Type or Print Name Authority (i   | .e. Power of Attorney)   | Date                               |
| HC62 Box 62140 Eureka, NV   | 237-5439   |                                    |
| Address/City/State/Zip 89316  | Phone Number   | FAX Number                         |
|   |  |                                    |
| FOR USE BY THE COUNTY ASSESSOR OR   | DEPARTMENT OF TAXATI   |                                    |
| Application Received  | 9-1-09   |                                    |
| Application Received  Property Inspected  | Date Ini   | °35                                |
| ☐ Property Inspected ☐ Income Records Inspected:  | Date Ini  Date Ini   | ONB<br>tial                        |
| Application Received  Property Inspected  | Date Ini  Date Ini   | 0NSS<br>tial<br>tial               |
| ☐ Property Inspected ☐ Income Records Inspected:  | Date Ini  Date Ini  Date Ini  Date Ini                         | tial tial tial                     |
| ☐ Property Inspected ☐ Income Records Inspected: ☐ Written Notice of Approval or Denial Sent to Applicant   | Date Ini Date Ini Date Ini Date Ini Date Ini                   | tial tial tial tial                |
| ☐ Property Inspected ☐ Income Records Inspected: ☐ Written Notice of Approval or Denial Sent to Applicant ☐ Application forwarded to Department of Taxation   | Date Ini | tial tial tial                     |
| □ Property Inspected □ Income Records Inspected: □ Written Notice of Approval or Denial Sent to Applicant □ Application forwarded to Department of Taxation □ Department of Taxation returned application  Reasons for Approval or Denial and Other Pertinent Comments: | Date Ini | tial tial tial tial tial tial      |
| Property Inspected  Income Records Inspected:  Written Notice of Approval or Denial Sent to Applicant Application forwarded to Department of Taxation Department of Taxation returned application  Reasons for Approval or Denial and Other Pertinent Comments:         | Date Ini | tial tial tial tial                |

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