DOC # 0213966 APN (Assessor's Parcel Number): Official Recording requested By EUREKA COUNTY ASSESSOR 07 - 200 - 34Eureka County = NV Mike Rebaleati - Recorder Page 1 Recorded By: LLH Return this application to: Book- 493 Page- 0074 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: RAND REVOCABLE LIVING TRUST Representative: Address: HC 62 Box 62140 Address: City/State/Zip: Eureka, NV 89316 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.) raising erops, I westock 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 1

5.) What is the date the property was originally placed in sagricultural purposes? 1976/1979	ervice by the owners lis	sted above for
6.) Was this property previously assessed as agricultural? assessed as agricultural? Many years	If yes, who	en was it
7.) Was the gross income from agricultural use of the land \$5,000 or more? Yes No	during the preceding c	alendar year
8.) Please attach a statement of revenues and expenses related and include a copy of IRS Form F. Additional documentat assessor.	ated to the agricultural ion may be requested b	use of the land y the county
The undersigned hereby certify the foregoing information s best of (my) (our) knowledge. (I) (We) understand if this applicatio liens for undetermined amounts. (I) (We) understand that if any portiour responsibility to notify the assessor in writing within 30 days of the content of the cont	on is approved, this propert ion of this land is converted he conversion.	y may be subject to to a higher use, it is
EACH OWNER OF RECORD OR HIS AUTHORIZED REPRESEN BY A REPRESENTATIVE, THE REPRESENTATIVE MUST INI CAPACITY, AND UNDER WHAT AUTHORITY. PLEASE TYPE	DICATE FOR WHOM HE	IS SIGNING, HIS
RAND REVOCABLE LIVING TRUST by:	<u> </u>	
Signature of Applicant or Agent Capaci	city (Owner, Represent	ative, or Lessee) 9-1-09
Type or Print Name Authority (i.e.	e. Power of Attorney)	Date
HC62 Box 62140 Eureka, NV	2375429	
Address/City/State/Zip 89316	Phone Number	FAX Number
FOR USE BY THE COUNTY ASSESSOR OR D. **Description** **	EPARTMENT OF TAXATIO One Date Initi	118
☐ Property Inspected ☐ Income Records Inspected:	Date Initi	al
	Date Initi	al
☐ Written Notice of Approval or Denial Sent to Applicant ☐ Application forwarded to Department of Taxation	Date Initi	al
Application forwarded to Department of Taxation Department of Taxation returned application	Date Initi	al
Reasons for Approval or Deniza and Other Pertinent Comments:	Date Initi	al
Approved (42.	I Danit Him	1m, 9-2-09
Signature of Official Processing Application Th	e July 18561	Date Date
//		40.40

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