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Official
Recording requested By
PALISADE RANCH

l Record

Eureka County - NV Mike Rebaleati - Recorder

Fee: RPTT: Page 1 of 2 Recorded By: FES

Book- 496 Page- 0031



APN (Assessor's Parcel Number):

04-370-26

Return this application to: Cureka 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 1^{st} . 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: STITZEL, Rita	Representative:
Address: P. O. Box 236	Address:
City/State/Zip: Carlin, NV 89822	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 indus	trial 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 crop	es, livestock, poultry, fur-bearing animals,
bees, aquatic agriculture, hydroponic gardens.)	o, 2, 0010 oct, po 200, 100 0010000,
3rd class arozinh	
ma wass grazing	
3.) What is the size of the land devoted to agriculture	al use? 1,080 Ac
leased	-
4.) Is this parcel contiguous to other lands controlled	I by the owner and designated as
agricultural? Ves / No	

agricultural purposes?	vice by the owners	listed above for
		/\
6.) Was this property previously assessed as agricultural? 2009-10	Yes, w	then was it
7.) Was the gross income from agricultural use of the land d \$5,000 or more? Yes No	uring the preceding -	calendar year
8.) Please attach a statement of revenues and expenses related and include a copy of IRS Form F. Additional documentation assessor.	ed to the agriculture n may be requested	nd use of the land by the county
		and the state of the state of
The undersigned hereby certify the foregoing information subbest of (my) (our) knowledge. (I) (We) understand if this application liens for undetermined amounts. (I) (We) understand that if any portion our responsibility to notify the assessor in writing within 30 days of the	is approved, this prop of this land is convert	erry may be subject to
EACH OWNER OF RECORD OR HIS AUTHORIZED REPRESENTATIVE BY A REPRESENTATIVE, THE REPRESENTATIVE MUST INDICAPACITY, AND UNDER WHAT AUTHORITY. PLEASE TYPE T	CATE FOR WHOM I	IE 15 SIGNING, HIS
In Auril	Ouron	
Signature of Applicant or Agent Capacit	y (Owner, Represe	ntative, or Lessee)
	All and a second	•
Rita Stitzel		11/18/2009
	Power of Attorney) Date
	The state of the s	₩7E <u>—</u>
20 Bay 126 Parten M/89832	The state of the s	₩7E <u>—</u>
P.O. Box 236 Carten, N89822	175-754-6219	9 154-3242
P.O. Box 136 Carlin, W89822 Address/City/State/Zip	The state of the s	₩7E <u>—</u>
Address/City/State/Zip FOR USE BY THE COUNTY ASSESSOR OR DEP	775-754-6219 Phone Number ARTMENT OF TAXAT	754-3242 FAX Number
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FOR USE BY THE COUNTY ASSESSOR OR DEP Application Received DMIRE FOR INC.	775-754-6219 Phone Number ARTMENT OF TAXAT	754-3242 FAX Number
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FOR USE BY THE COUNTY ASSESSOR OR DEP Application Received Property Inspected Income Records Inspected: Written Notice of Approval or Denial Sent to Applicant Application forwarded to Department of Taxation	775-754-6219 Phone Number ARTMENT OF TAXAT 11-23-619 Date In Date In Date In	FAX Number ON 311 itial itial
FOR USE BY THE COUNTY ASSESSOR OR DEP Application Received 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	Phone Number ARTMENT OF TAXAT 1-23-0-7 Date In Date In Date In	FAX Number TON 34 Itial Itial Itial
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