

APN#: 005-010-34  
Escrow No. 24-221129

**MAIL TAX STATEMENT TO AND  
WHEN RECORDED RETURN TO:**

Zing Properties, LLC  
PO Box 2744  
Silverdale, WA 98383

EUREKA COUNTY, NV  
RPTT:\$156.00 Rec:\$37.00  
\$193.00 Pgs=4  
WFG NEVADA - RW  
KATHERINE J. BOWLING, CLERK RECORDER

**2025-254142**

**01/13/2025 02:13 PM**

**GRANT, BARGAIN, SALE DEED**

R.P.T.T. \$156.00

THIS INDENTURE WITNESSETH: That

**Michael Kincade, Trustee of the Michael Kincade Revocable Trust of 2014,**

for a valuable consideration, the receipt of which is hereby acknowledged, does hereby Grant, Bargain, Sell and Convey to

**Zing Properties, LLC,**

all that real property situated in the County of Eureka, State of Nevada, bounded and described as follows:

**SEE EXHIBIT "A" ATTACHED HERETO AND MADE A PART HEREOF**

- SUBJECT TO:
1. Taxes for the fiscal year 2024-2025.
  2. Rights of way, reservations restrictions, easements and conditions of record.

Together with all and singular the tenements, hereditaments and appurtenances thereunto belonging or in anywise appertaining.

## ACKNOWLEDGMENT

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

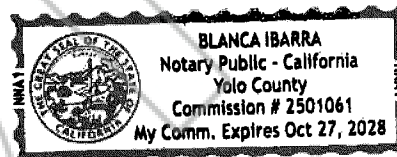
State of California  
County of Sacramento

On 1/3/2025 before me, Blanca Ibarra, Notary Public  
(insert name and title of the officer)

personally appeared Michael N. Kincade,  
who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are  
subscribed to the within instrument and acknowledged to me that he/she/they executed the same in  
his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the  
person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing  
paragraph is true and correct.

WITNESS my hand and official seal.



Signature  (Seal)

WITNESS my hand this 27 day of January, 2025.

Michael Kincade, Trustee of the Michael Kincade Revocable Trust of 2014

By [Signature]  
Michael N. Kincade as Trustee

STATE OF NEVADA  
COUNTY OF \_\_\_\_\_

This instrument was acknowledged before me this \_\_\_\_\_ day of January, 2025 by Michael N. Kincade, as Trustee, of Michael Kincade, Trustee of the Michael Kincade Revocable Trust of 2014.

See Attached  
Notary Public for Nevada  
My Commission Expires: 10/27/28

**EXHIBIT "A"**  
**LEGAL DESCRIPTION**

T31N, R48E, SEC. 15, LOT 1; NE 1/4 NW 1/4; S 1/2 NW 1/4; SW 1/4, AKA W 1/2, RECORDS OF EUREKA COUNTY, NEVADA.

APN: 005-010-34

COPY

**STATE OF NEVADA  
DECLARATION OF VALUE**

**1. Assessors Parcel Number(s)**

a) **005-010-34**

b) \_\_\_\_\_  
c) \_\_\_\_\_  
d) \_\_\_\_\_

**2. Type of Property:**

- a) ☒ Vacant Land      b) ☐ Single Fam. Res.  
c) ☐ Condo/Twnhse      d) ☐ 2-4 Plex  
e) ☐ Apt. Bldg      f) ☐ Comm'l/Ind'l  
g) ☐ Agricultural      h) ☐ Mobile Home

☐ Other \_\_\_\_\_

**FOR RECORDER'S OPTIONAL USE  
ONLY**

Book: \_\_\_\_\_ Page: \_\_\_\_\_

Date of Recording: \_\_\_\_\_

Notes: \_\_\_\_\_

**3. Total Value/Sales Price of Property:**

**\$40,000.00**

Deed in Lieu of Foreclosure Only (value of property) ( \_\_\_\_\_ )

Transfer Tax Value:

**\$40,000.00**

Real Property Transfer Tax Due:

**\$156.00**

**4. If Exemption Claimed:**

a. Transfer Tax Exemption per NRS 375.090, Section # \_\_\_\_\_

b. Explain Reason for Exemption: \_\_\_\_\_

**5. Partial Interest: Percentage being transferred: \_\_\_\_\_ %**

The undersigned declares and acknowledges, under penalty of perjury, pursuant to NRS 375.060 and NRS 375.110, that the information provided is correct to the best of their information and belief, and can be supported by documentation if called upon to substantiate the information provided herein. Furthermore, the parties agree that disallowance of any claimed exemption, or other determination of additional tax due, may result in a penalty of 10% of the tax due plus interest at 1% per month. Pursuant to NRS 375.030, the Buyer and Seller shall be jointly and severally liable for any additional amount owed.

**Signature** \_\_\_\_\_

**Capacity** Grantor

**Signature** \_\_\_\_\_

**Capacity** Grantee Agent

**SELLER (GRANTOR) INFORMATION  
(REQUIRED)**

**BUYER (GRANTEE) INFORMATION  
(REQUIRED)**

Print Name: **Michael Kincade, Trustee of the  
Michael Kincade Revocable Trust of  
2014**

Print Name: **Zing Properties, LLC**

Address: **XXX Parcel 501034 Eureka County  
320.63 Acres**

Address: **PO Box 2744**

City: **Crescent Valley**

City: **Silverdale**

State: **NV** Zip: **89821**

State: **WA** Zip: **98383**

**COMPANY/PERSON REQUESTING RECORDING required if not the seller or buyer)**

Print Name: **WFG National Title Insurance Company**

Escrow #: **24-221129**

Address: **9580 W Sahara Avenue, Suite 120**

City: **Las Vegas**

State: **NV**

Zip: **89117**

AS A PUBLIC RECORD THIS FORM MAY BE RECORDED/MICROFILMED