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APPLICATION FOR OPEN SPACE USE ASSESSMENT JAN 1 7 2002

Note: If necessary, attach extra pages

THIS PROPERTY MAY BE SUBJECT TO LIENS FOR UNDETERMINED AMOUNTS (PLESE READ CAREFULLY THE ATTACHED INFORMATION AND INSTRUCTION SHEET)

Pursuant to Nevada Revised Statutes, Chapter 361.A (I) (****),	
EDWARD FEIN	
(Please print or type the name of each owner of record or his re	presentative)
apply to be granted, on the below described property, an asses (I) (We) understand that if this application is approved, it will be	recorded and become a public record.
This property is located in <u>Glenhrusk</u> , (City)	Dovalas County, Nevada and is described (Douglas)
as <u>APN 01.070-160</u> (Assessor's Parcel Number	er (s))
Legal description <u>ATTACHE</u>	
This property is 156 acres in size and the current use RESIDENTIAL	of the property is (i.e. grazing, recreation, residential, etc.)
This property is located in an area officially classified by the government planned for open space uses. $Historical Torigonal Torigona$	erning body of the (city/county) circle one) as an area
For what reasons do you feel the above described property sho	uld be classified as open space?
Is the property available and accessible to the general public? _	
If not, explain	
If open space real property classification is sought on the basis answer the following questions:	/ /
1. The legal authority granting historical status is <u>31/</u>	TIE HOTORIC REGISTRY
2. The historic name of the property is <u>BLISS</u>	
 The address of the property is/955 Glenbe The current use of the property is RESIDENT 	TIAL
5. The improvements were constructed in	(Estimate if unknown)
Yeal) (I)(We) hereby certify that the foregoing information submitted is	
knowledge. (I)(We) understand that if this application is approve	ed, this property may be subject to liens for undetermined
amounts (Each owner of record or his authorized representative signing, in what capacity and under what authority.) Please prin	re must sign. Representative must indicate for whom he is at name under each signature
Signature of Applicant or Applicant Address and Phone Number	Centrook NV 89413 1/08/02
Signature of Applicant or Agent – Address and Phone Number EDWARD FEIN	775.7495161
Signature of Applicant or Agent – Address and Phone Number	775.7495161 480.314.9522-JAN+FEB, 2002 Date
Signature of Applicant or Agent – Address and Phone Number	Date
TOUCE SALDUOR	
Signature of Applicant or Agent – Address and Phone Number	Date
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ate income records inspected (If applicable)	N/A	
	2/-/	(Initials)
Approved X Denied	3/7/2002	
	(Date)	(Initials)
ritten notice of approval or denial sent to app	plicant.	
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approved, application recorded:		_\
	(Date)	(Initials)
epartment of Taxation:		
		State Name
Application returned to assessor for va	aluation and entry on the roll.	
	(Date)	(Initials)
easons for approval or denial and other perti	inent comments:	
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REQUESTED BY
DOUGLAS COUNTY
IN OFFICIAL RECORDS OF
DOUGLAS CO. HEYADA

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LINDA SLATER RECORDER

\$ PAID DEPUTY