

OFFICIAL RECORD

Requested By:

D C/ASSESSOR

APN (Assessor's Parcel Number):

1220-06-001-013

Douglas County - NV
Werner Christen - Recorder
Page: 1 Of 2 Fee: 0.00
BK-0505 PG- 8437 RPTT: 0.00



Return this application to:
Douglas County Assessor
1616 8th St
P O Box 218
Minden, NV 89423

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: TRANS-Sierra Investments, Inc
Address: P.O. Box 1047
City/State/Zip: Minden, NV 89423

Representative: Gary Casteel
Address: P.O. Box 1047
City/State/Zip: Minden, NV 89423

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.)

Agricultural - Residential
Raise cattle and train and board horses
Grow grass hay on irrigated land

RECEIVED

MAY 09 2005

ASSESSOR'S OFFICE
DOUGLAS COUNTY

5.) What is the date the property was originally placed in service by the owners listed above for agricultural purposes? Purchased on 4/27/05 - Previously used for agriculture.

6.) Was this property previously assessed as agricultural? Do Not Know If yes, when was it assessed as agricultural? _____

7.) Was the gross income from agricultural use of the land during the preceding calendar year \$5,000 or more? Yes X No _____

8.) Please attach a statement of revenues and expenses related to the agricultural use of the land and include a copy of IRS Form F. Additional documentation may be requested by the county assessor.

The undersigned hereby certify the foregoing information submitted is true, accurate and complete to the best of (my) (our) knowledge. (I) (We) understand if this application is approved, this property may be subject to liens for undetermined amounts. (I) (We) understand that if any portion of this land is converted to a higher use, it is our responsibility to notify the assessor in writing within 30 days of the conversion.

EACH OWNER OF RECORD OR HIS AUTHORIZED REPRESENTATIVE MUST SIGN BELOW. IF SIGNED BY A REPRESENTATIVE, THE REPRESENTATIVE MUST INDICATE FOR WHOM HE IS SIGNING, HIS CAPACITY, AND UNDER WHAT AUTHORITY. PLEASE TYPE THE NAME UNDER EACH SIGNATURE.

Gary B. Casteel Owner
Signature of Applicant or Agent Capacity (Owner, Representative, or Lessee)

Gary B. Casteel 5/5/05
Type of Print Name Authority (i.e. Power of Attorney) Date

P.O. Box 1047 Minden, NV 89423 (775) 265-2087 265-6703
Address/City/State/Zip Phone Number FAX Number

| FOR USE BY THE COUNTY ASSESSOR OR DEPARTMENT OF TAXATION | | |
|---|-----------------|----------------|
| <input checked="" type="checkbox"/> Application Received | <u>5/17/05</u> | <u>DS</u> |
| | Date | Initial |
| <input checked="" type="checkbox"/> Property Inspected | <u>5/17/05</u> | <u>DS</u> |
| | Date | Initial |
| <input checked="" type="checkbox"/> Income Records Inspected: | <u>5/17/05</u> | <u>DS</u> |
| | Date | Initial |
| <input checked="" type="checkbox"/> Written Notice of Approval or Denial Sent to Applicant | <u>5/17/05</u> | <u>DS</u> |
| | Date | Initial |
| <input type="checkbox"/> Application forwarded to Department of Taxation | _____ | _____ |
| | Date | Initial |
| <input type="checkbox"/> Department of Taxation returned application | _____ | _____ |
| | Date | Initial |
| Reasons for Approval or Denial and Other Pertinent Comments: <u>Meets income requirements for land</u> | | |
| <u>Douglas N. Sourenman</u> | <u>Assessor</u> | <u>5/17/05</u> |
| Signature of Official Processing Application | Title | Date |