

APN (Assessor's Parcel Number):

1319-11-002-023

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

DOC 05/20/2008 10:50 AM Deputy: GB OFFICIAL RECORD Requested By: DC/ASSESSOR

> Douglas County - NV Werner Christen - Recorder

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This space for Recorder's Use Only

MAY 0 8 2008

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: The Nature Conservancy Representative:				
Address: 1 E. First St., Suite 1007 Address:				
City/State/Zip Reno, NV 89501 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, hydroponics gardens				
Agricultural - cattle grazing				
3.) What is the size of the land devoted to agricultural use?				
0.59 acres				
4.) Is this parcel contiguous to other lands controlled by the owner and designated as				
agricultural? Yes No				
RECEIVED				

NTC Approved 11/02

	5.) What is the date the property was originally placed in service by the owners listed above for agricultural purposes? $12/05/2007$				
	6.) Was this property previously assessed as agricultural? YCS 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 No				
	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.				
		REPRESENT			
	Signature of Applicant or Agent Capacity (Owner, Representative, or Lessee)				
(PATRICK MACHULEN EMPLOYEE DIR. OF OPER.) 4/25/08				
1	Type or Print Name Authority (i.e. Power of Attorney) Date				
18	: (ST ST. #1007 ROUD NV 8970)	322.4990	3225132		
	Address/City/State/Zip	Phone Number	FAX Number		
	FOR USE BY THE COUNTY ASSESSOR OR DEPARTMENT OF TAXATION				
1	Application Received	$\frac{5/8/6\%}{\text{Date}_{i}}$ In	itial _		
	Property Inspected	5/15/08	DS		
	√ Income Records Inspected:	Date In	itial		
1	Written Notice of Approval or Denial Sent to Applicar	, , , ,	itial		
			itial		
1	☐ Application forwarded to Department of Taxation	Date In	itial		
	☐ Department of Taxation returned application		itial		
\	Reasons for Approval or Denial and Other Pertinent Comments		itiai		
	Used for grazing meets income	requirements			
Ч	Louis 1 Somemour	Assessor	5/19/08		
		Title Title	Date		