DOUGLAS COUNTY, NV

This is a no fee document NO FEE

2015-862708 05/27/2015 10:39 AM

DC/ASSESSOR

Pgs=4

KAREN ELLISON, RECORDER

-Assessor's Parcel Number: 1219-03-001-061

Recording Requested By:

Name: DOUGLAS CO ASSESSOR

Address: 16168TH ST

City/State/Zip MINDEN, NV 89423

Real Property Transfer Tax:

AGRICULTURAL USE ASSESSMENT APPLICATION

(Title of Document)

This page added to provide additional information required by NRS 111.312 Sections 1-2. (Additional recording fee applies)

This cover page must be typed or legibly hand printed.

APN (Assessor's Parcel Number):

1219-03-001-061

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

RECEIVED

MAY 0 4 2015

ASSESSOR'S OFFICE DOUGLAS COUNTY

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 e	ach owner of record or his representative.
Attach additional sheets if necessary:	
Owner: Maddi's Friesian Ranch LLC	Representative: Gregory Walsh
Address: 1351 Old Foothill Rd S	Address: 1351 Old Foothill Rd S
City/State/Zip: Gardnerville, NV 89460	City/State/Zip: Gardnerville, NV 89460
2.) Describe all the uses of the land for which you	are requesting an agricultural designation,
such as agricultural, residential, commercial, or in	ndustrial 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.)	,
Rented out home approx 1.5 acre area, Employee	e manufactured house approx 0.5 acre area
Same operation as conducted on APN 1219-03-	001-058, 059, 062, 063 and 064
-commencing with the ownership change in 11/20	013 (Breeding Friesian horses, growing
alfalfa and grass hay, cattle grazing)	
3.) What is the size of the land devoted to agricult	ural use? 38 acres (includes area with barns/hay bldg)
4.) Is this parcel contiguous to other lands control	led by the owner and designated as
agricultural? Yes X No adjo	oins APN-03-001-058, 062 and 063

5.) What is the date the property was originally pla agricultural purposes? 11/2013	aced in service by the owners listed above for	
6.) Was this property previously assessed as agricultural? <u>Unknown</u>	ıltural? <u>Unknown</u> If yes, when was it	
7.) Was the gross income from agricultural use of t \$5,000 or more? Yes X No No		
8.) Please attach a statement of revenues and expendent and include a copy of IRS Form F. Additional documents assessor.		
The undersigned hereby certify the foregoing information best of (my) (our) knowledge. (I) (We) understand if this aliens for undetermined amounts. (I) (We) understand that if a our responsibility to notify the assessor in writing within 30 d	any portion of this land is converted to a higher use, it is	· · · · · · · · · · · · · · · · · · ·
EACH OWNER OF RECORD OR HIS AUTHORIZED REP BY A REPRESENTATIVE, THE REPRESENTATIVE MU CAPACITY, AND UNDER WHAT AUTHORITY. PLEASI	UST INDICATE FOR WHOM HE IS SIGNING, HIS E TYPE THE NAME UNDER EACH SIGNATURE.	79
Signature of Applicant or Agent	Owner Capacity (Owner, Representative, or Lessee)	
Signature of Applicant of Agent	Capacity (Owner, Representative, of Lessee)	
Gregory Walsh	4/30/2015	
Type or Print Name Author	rity (i.e. Power of Attorney) Date	
1351 Old Foothill Rd S, Gardnerville NV 89460	775-544-7582 775-783-9160	
Address/City/State/Zip	Phone Number FAX Number	
FOR USE BY THE COUNTY ASSESSOR	OR DEPARTMENT OF TAXATION	
Application Received	Date / Initial	1
Property Inspected	5/5/15 08	Ì
1 Income Records Inspected:	Date Initial	1
	Date / Initial	
Written Notice of Approval or Denial Sent to Applic	cant 5/11/15 Date Initial	
☐ Application forwarded to Department of Taxation		
☐ Department of Taxation returned application	Date Initial	
	Date Initial	
Reasons for Approval of Denial and Other Pertinent Commer	is:	
7010	1-	
Signature of Official Processing Application	Title Date	

Additional Signature Page Attach to Application if Necessary

Juli d. Gres	OWNER	
Signature of Applicant or Agent	Capacity (Owner, Represen	itative, or Lessee
Ruth L. Page	Owner	3/10/2011
Type or Print Name	Authority (i.e. Power of Attorney)	Date
1351 Old Foothill Rd S, Gardnerville, N	V 89460 775-762-2300	775-783-9160
Address/City/State/Zip	Phone Number	FAX Number
Signature of Applicant or Agent	Capacity (Owner, Represent	tative, or Lessee)
Type or Print Name	Authority (i.e. Power of Attorney)	Date
Address/City/State/Zip	Phone Number	FAX Number
Signature of Applicant or Agent	Capacity (Owner, Represent	ative, or Lessee)
Type or Print Name	Authority (i.e. Power of Attorney)	Date
Address/City/State/Zip	Phone Number	FAX Number
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Type or Print Name	Authority (i.e. Power of Attorney)	Date
Address/City/State/Zip	Phone Number	FAX Number