



00089306201909277080040042

KAREN ELLISON, RECORDER

Assessor's Parcel Number. 1319-35-000-011

Recording Requested By

Name: TRENT A. THOLEN

Address: 1616 8<sup>TH</sup> STREET

City/State/Zip MINDEN, NV 89423

Real Property Transfer Tax: \$N/A

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):

1319-35-000-011

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

**RECEIVED**

APR 08 2019

This space for Recorder's Use Only

ASSESSOR'S OFFICE  
DOUGLAS COUNTY

**Agricultural Use Assessment Application**

*Return this application to the County Assessor's Office at the address shown above  
no later than June 1<sup>st</sup> 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 J lazy J ranch llc  
Address 1416 Sugar Maple Ave  
City/State/Zip Gardnerville NV, 89410

Representative William Drew Kolbe  
Address 1416 Sugar Maple Ave  
City/State/Zip Gardnerville NV, 89410

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 )

sole agriculture land used for grazing livestock and hay production

3 ) What is the size of the land devoted to agricultural use? 22.37

4 ) Is this parcel contiguous to other lands controlled by the owner and designated as agricultural? Yes  No

5) What is the date the property was originally placed in service by the owners listed above for agricultural purposes? 10/12/18

6) Was this property previously assessed as agricultural? yes If yes, when was it assessed as agricultural? 12/14/17 and all prior years

7) Was the gross income from agricultural use of the land during the preceding calendar year \$5,000 or more? Yes ✓ 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

[Signature] \_\_\_\_\_ Capacity (Owner, Representative, or Lessee)  
Signature of Applicant or Agent

William Drew Kolbe \_\_\_\_\_ 10/20/18  
Type or Print Name Authority (i.e. Power of Attorney) Date

1416 Sugar Maple Ave \_\_\_\_\_ (775) 560-1455 \_\_\_\_\_  
Address/City/State/Zip Grandmerville, NV, 89410 Phone Number FAX Number

FOR USE BY THE COUNTY ASSESSOR OR DEPARTMENT OF TAXATION		
<input checked="" type="checkbox"/> Application Received	<u>4/9/19</u> Date	<u>TT</u> Initial
<input type="checkbox"/> Property Inspected <u>N/A</u>	<u>4/9/19</u> Date	<u>TT</u> Initial
<input type="checkbox"/> Income Records Inspected <u>N/A</u>	<u>4/9/19</u> Date	<u>TT</u> Initial
<input checked="" type="checkbox"/> Written Notice of Approval or Denial Sent to Applicant	<u>4/9/19</u> Date	<u>TT</u> 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>Moved from sole proprietorship to LLC</u>		
<u>[Signature]</u> Signature of Official Processing Application	<u>Assessor</u> Title	<u>4/9/19</u> Date

