



00113133202009479100030037

KAREN ELLISON, RECORDER

Assessor's Parcel Number: 1220-31-001-008

Recording Requested By:

Name: TRENT THOLEN, ASSESSOR

Address: 1616 8TH ST

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):

1220-31-001-008

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

RECEIVED

JUN 17 2020

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 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:

Whipple Revocable Trust 2014

Owner: Julie A. Whipple Trustee

Representative: _____

Address: 121 Fredericksburg Rd

Address: _____

City/State/Zip: Gardnerville, NV 89460

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, hydroponic gardens.)

We grow & cut the grass hay - 1st cutting on 6-14-20. Since purchased this property on 11-15-19, we have buyers we intend to sell to. We use the existing pasture to graze the AQHA horses we breed & sell.

3.) What is the size of the land devoted to agricultural use? 19

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? 11-15-19

6.) Was this property previously assessed as agricultural? yes If yes, when was it assessed as agricultural? yes prev owned by other

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

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.

Julie A. Whipple

Signature of Applicant or Agent
Whipple revocable trust 2014

Capacity (Owner, Representative, or Lessee)

Julie A. Whipple, Trustee

Type or Print Name

Authority (i.e. Power of Attorney)

6-17-20

Date 775

389 Mottsville Ln Gardnerville, NV
Address/City/State/Zip

951 606-2-183
Phone Number

782-6916
FAX Number

FOR USE BY THE COUNTY ASSESSOR OR DEPARTMENT OF TAXATION

- Application Received Date 6/17/20 Initial J
- Property Inspected Date 6/18/20 Initial J
- Income Records Inspected: next year Date _____ Initial _____
- Written Notice of Approval or Denial Sent to Applicant Date 6/18/20 Initial J
- Application forwarded to Department of Taxation Date _____ Initial _____
- Department of Taxation returned application Date _____ Initial _____

Reasons for Approval or Denial and Other Pertinent Comments:

continued ag use. Approval contingent upon meeting income requirement next yr

[Signature]
Signature of Official Processing Application

Assessor
Title

6/18/2020
Date