Application For Special Assessment Of Unzoned Farm Land And Additional Tax Deferral as Provided by ORS 308.370 to 308.395 An application must be filed On or Before April 1 of EACH Year Filed with the Hlamath County Assessor for the 10-11 Assessment Year THIS SPACE FOR ASSESSOR'S USE ONLY CODE AND -> Enter Applicant's Name and Address Below leavitt, Lister ‡ Cordellia Le 1, Bor 103 Lonanza, Oxegon STATE OF OREGON I certify that this application was received at County Record of Deeds, Book/Vol. M. 70 DE NOME DEPUTY WM D. MILNE Complete Only If Account Number Does Not Describe Property Rge. Account Number Code Number Name the owners of record if different than applicant: A. What is the ownership interest of the applicant(s) in the above-described property? | Fee Owner | Life Estate | Contract Purchaser | Other (explain) B. Are there any outstanding leases or options to buy the surface rights of the above-described land for non-farm use? Yes No C. What was the gross farm income from the above-described land for each of the 5 calendar years immediately preceding the year of this application? (See General Information, Item 7, over.) _: 19___ E. Is the above-described land being used and has it been used during the preceding two years as a bona fide farm; that is, for the raising, harvesting and selling of crops to produce a profit in money or for the feeding, breeding, management and sale of livestock to produce a profit in money? 1. Show the farm use of the land by completing the schedules below: MAXIMUM NUMBER LIVESTOCK OR POULTRY (List by Type) LAND USE 020 Cropland—Irrigated Cropland-Non-Irrigated 至 35 ထ 2 9 2. List the major crops grown during the last crop year and the acres of each: WARNING: Unzoned farm land, when specially assessed at farm-use value and later disqualified, becomes liable for additional taxes during the last 5 or lesser number of years in which the farm-use assessment was in effect, together with interest at 6%. (See General Information, Item 8, over.) DECLARATION I declare under the penalties for false swearing as contained in ORS 305.990(5) that this document, including any attached schedules and statements, has been examined by me and to the best of my knowledge is a true, correct and complete statement. OF APPLICANT (S) ASSESSOR'S COPY