



APPLICATION FOR ASSESSMENT AND TAXATION OF AGRICULTURAL LAND
1969 Farmland Assessment Act, Utah Code 59-2-501 through 59-2-515 (amended in 1993)
Administrative Rule R884-24P-26

AFFIDAVIT OF ELIGIBILITY FOR THE YEAR OF 2024

Parcel no(s): 26-34-201-004
Together with: _____
Greenbelt application date: 1/26/1975, 12/30/1977
Owner's Phone Number: 30-794-3100 Owner's Email Address: jake@andersonlawpllc.com

Application is hereby made for assessment and taxation of the following legally described land:

LAND TYPE: <u>DRYLAND 3</u>	ACRES: <u>24.48</u>
Type of livestock: <u>N/A</u>	Type of crop: <u>Wheat</u>
AUM (Animal unit/month): <u>N/A</u>	Quantity per acre: <u>10-17 bushel</u>

CERTIFICATION: READ EACH STATEMENT, INITIAL, AND SIGN

I certify:

- 1) THE FACTS SET FORTH IN THIS APPLICATION ARE TRUE. EM
- 2) The agriculture land covered by this application constitutes no less than five contiguous acres excluding the home site and other non-agricultural acreage (see Utah Code 59-2-503 for waiver). EM
- 3) The land is currently devoted to agricultural use and has been so devoted for two successive years immediately preceding the tax year for which the valuation under this act is requested. EM
- 4) The land produces in excess of 50% of the average agricultural production per acre for the given type of land. EM
- 5)
 - a) I am fully aware of the five year rollback provision, which becomes effective upon a change in the use or other withdrawal of all or part of the eligible land; EM
 - b) I understand that the rollback tax is a lien on the property until paid; EM
 - c) I understand the application constitutes consent to audit and review of the property. EM
 - d) I understand that I must notify the County Assessor of a change in land use to any non-qualifying use, and that a penalty of the greater of \$10 or 2 percent of the computed rollback tax due for the last year will be imposed on failure to notify the Assessor within 120 days after change in use. EM

UNDER UTAH LAW, YOU MAY APPEAL THROUGH THE BOARD OF EQUALIZATION YOUR CURRENT YEAR PROPERTY TAX ASSESSMENT OR ANY ACTION TAKEN BY SALT LAKE COUNTY

OWNER(S) SIGNATURE(S): Emily B Markham

NOTARY PUBLIC

State of Utah County of Salt Lake

Emily B. Markham
(OWNER(S) NAME - PLEASE PRINT)

Appeared before me the 15 day of May, 2024 and duly acknowledged to me that they executed the above application and that the information contained therein is true and correct.

[Signature]
NOTARY PUBLIC SIGNATURE



COUNTY ASSESSOR USE ONLY	
Approved (subject to review) <input checked="" type="checkbox"/> Denied <input type="checkbox"/>	
<u>Ann Per</u>	<u>5/29/24</u>
DEPUTY COUNTY ASSESSOR	DATE

BASTIAN FAMILY FOUNDATION

Parcel Number. 26-34-201-004

Location 7051 W 11800 S

BEG S 89-30'06" E 2284.25 FT FR NW OF SEC 34, T3S, R2W, SLM;
S 0-04'36" E 1325 90 FT; S 89-31'41" E 1341 30 FT; N
0-04'36" W 757 72 FT; 89-32'10" W 1263.18 FT, N 0-27'50" E
10 FT; S 89-32'10" E 9 84 FT, NE'LY ALG 10 FT RADIUS CURVE
TO L. 2.10 FT (CHD N 5-59'05" E), N 0-01'53" W 556 23 FT; N
89-30'06" W 88 71 FT TO BEG

LESS ANY PORTIONS ALREADY AT MARKET VALUE AND HOMESITES

FARMLAND ASSESSMENT ACT
LESSEE'S AFFIDAVIT OF LAND USE AND AGRICULTURAL PRODUCTION

THIS AFFIDAVIT IS GIVEN AND ISSUED BETWEEN:

_____ AND _____
FARMER OR LESSEE CURRENT OWNER

AND BEGINS ON _____ AND EXTENDS THROUGH _____
MO/DAY/YR MO/DAY/YR

THE DOLLAR AMOUNT PER ACRE OF THE LEASE/RENTAL PER ACRE: \$ _____

LAND TYPE: _____	ACRES: _____
Type of livestock: _____	Type of crop: _____
AUM (Animal unit/month): _____	Quantity per acre: _____

CERTIFICATION: READ CERTIFICATE AND SIGN

LESSEE/FARMER HEREBY AFFIRMS AND DECLARES UNDER PENALTIES OF PERJURY THAT SAID LAND PRODUCES IN EXCESS OF 50 PERCENT OF THE AVERAGE AGRICULTURAL PRODUCTION PER ACRE FOR A GIVEN TYPE OF LAND AND THE GIVEN COUNTY AREA ANNUALLY. WITHOUT THE CONTRIBUTION OF ABOVE-DESCRIBED LAND IT WOULD SIGNIFICANTLY AFFECT OR DIMINISH LESSEES OVERALL OPERATION AS AN AGRICULTURAL UNIT

LESSEE/FARMER'S SIGNATURE: _____

PHONE NUMBER: _____ EMAIL: _____

ADDRESS: _____

NOTARY PUBLIC

State of _____ County of _____,

(LESSEE NAME - PLEASE PRINT)

_____ APPEARED BEFORE ME THE _____ DAY OF _____, 2024
AND DULY ACKNOWLEDGED TO ME THAT THEY EXECUTED THE ABOVE AFFIDAVIT AND THAT THE
INFORMATION CONTAINED THEREIN IS TRUE AND CORRECT.

NOTARY PUBLIC