



San Miguel County Assessor

Patricia D. Gallegos, County Assessor

AGRICULTURAL LAND APPLICATION

The burden of demonstrating primary agricultural use is placed on the owner of the land. The burden may be met with objective evidence of a bona fide agricultural use of the land for the year preceding the year in which application is made.

Tax Year: _____ Owner's Number: _____

School District: _____ Map Code: _____

I HEREBY APPLY TO HAVE THE FOLLOWING DESCRIBED LAND VALUED AS LAND USED PRIMARILY FOR AGRICULTURAL PURPOSES PURSUANT TO SECTION 7-36-20 OF THE PROPERTY TAX CODE.

1) Owner Name: _____

Address: _____

City: _____ State: _____

Phone Number: () _____ ZIP Code: _____

2) Legal Description of Land: _____

3) Use of land during the year preceding this year, for which the application is made:

a. Pasture? Yes No

b. Farming? Yes No

4) Do you own livestock? Yes No If yes, please complete Livestock Owners Report

5) If farmed, complete the following:

a. List crops: _____

b. Were crops sold? Yes No

c. Were crops retained? Yes No

d. Number of acres of irrigated land: _____

e. Number of acres grazed: _____ (MRGCD or Acequia Association)

6) Was land held for speculative land subdivision and sale or was land subdivided? _____

7) Was land used for commercial purposes of a non-agricultural nature? Yes No

8) Was land use for recreation? Yes No

9) Was land leased? Yes No If yes, identify the lessee.

a. Name: _____ Phone: () _____

Address: _____

City: _____ State: _____ ZIP Code: _____

b. Does the lessee own livestock? Yes No

c. What was the lessee's use of property? _____

I HEREBY ATTEST THAT TO THE BEST OF MY KNOWLEDGE, THE INFORMATION PROVIDED IS ACCURATE. I ALSO AGREE TO PROVIDE TO THE ASSESSOR, UPON A SPECIFIC WRITTEN REQUEST, NEEDED INFORMATION FROM MY FEDERAL INCOME TAX RETURNS FOR THE PURPOSE OF DETERMINING THE INCOME DERIVED FROM THE COMMERCIAL SALE OF AGRICULTURAL PRODUCTS FROM THE ABOVE DESCRIBED LAND.

SIGNATURE OF OWNER (or AGENT) OF LIVESTOCK

DATE

▼FOR OFFICIAL USE ONLY▼

Approval: YES NO

Comments:

Received
Verified
Entered

Assessor Employee:	Date: