



Union County

ASSESSOR

200 Court St. / P.O. Box 430
Clayton, NM 88415
Phone: 575-374-9441 / Fax: 575-374-2763

APPLICATION FOR VALUATION AS AGRICULTURAL LAND

Owner's name: _____ Address: _____
Phone Number: _____

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.

Description of land or attach Assessor's list if more than one parcel: (If an Assessor's list is needed please feel free to call and one will be provided.)

If this land is grazing land, what is the average number of head of livestock that graze this land each year?
_____ * (Please complete livestock schedule C attached)

Is this land grazed by livestock you own?
 Yes No

If no, whose livestock grazes this land?

Name: _____ Address: _____
Phone Number: _____

State the use of the land, type of irrigation system and crop being produced on the land for which you are making application.

I HEREBY AFFIRM THAT I AM THE OWNER OF THE LAND AND THAT THE INFORMATION CONTAINED IN THIS APPLICATION IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND I DO SO UNDER PAINS AND PENALTIES OF PERJURY.

I agree to provide to the Assessor, any information deemed necessary to provide proof of use of this land.

Signature of Owner or Owner's Authorized Agent:

_____ Date: _____ Owner Number: _____

Union County Assessor

P.O. BOX 430
 CLAYTON, NM 88415
www.unionnm.us

Phone: 575-374-9441

LAND OWNER LIVESTOCK SCHEDULE C REPORT

| CODE | CATTLE | NUMBER OF HD. | MONTHS in county | CODE | GOATS | NUMBER OF HD. | MONTHS in county | CODE | BISON | NUMBER OF HD. | MONTHS in county |
|------|------------|---------------|------------------|------|-----------|---------------|------------------|------|------------|---------------|------------------|
| 411 | BULLS | | | 731 | BUCK | | | 911 | BULL | | |
| 421 | COWS | | | 741 | MILK | | | 921 | COW 3 UP | | |
| 431 | HEIFERS | | | 751 | OTHER | | | 931 | HEIFER 1-3 | | |
| 441 | HFR. CLVS. | | | CODE | SHEEP | NUMBER OF HD. | MONTHS in county | 941 | HFR CLV. | | |
| 451 | STR. CLVS. | | | | | | | 951 | BULL CLV. | | |
| 461 | YRLNS. | | | 611 | RAMS | | | | | | |
| 811 | HORSES | | | 621 | EWES 2+ | | | | | | |
| | | | | 631 | EWES 1-2 | | | | | | |
| | | | | 641 | EWES UN 1 | | | | | | |

Print Name of Land Owner: _____ Owner # _____

PLEASE LIST LIVESTOCK OF LAND OWNER ONLY

PLEASE COMPLETE REVERSE SIDE OF THIS FORM

LAND OWNER LIVESTOCK SCHEDULE C REPORT

_____ Property is no longer being used for grazing purposes.

_____ Property is being used for my livestock (Report your livestock on the front of this form).

_____ Property is being leased (Leasee is responsible for reporting their livestock. Provide contact information below).

Name of Leasee: _____

Address: _____

City, State, Zip: _____

Phone # of Leasee: _____

Signature of Land Owner: _____ (Print owner name on front of this form)

Phone # of Land Owner: _____ Date Signed: _____

If the land is valued with "Agricultural Exemption" the land owner must provide proof that the land is being used for grazing.

If the land is **not being grazed**, it will be classified as "Raw Land", which will be an **INCREASE IN VALUE**.

RETURN WITHIN 30 DAYS TO ASSURE YOU RECEIVE THE CORRECT ASSESSMENT

Call our office should you have any questions 575-374-9441 or visit our website at www.unionnm.us for e-mail.