

ROBERT C. BROWNFIELD, TEHAMA COUNTY ASSESSOR
P.O. BOX 428, RED BLUFF, CA 96080
Phone (530) 527-5931 EXT 209 or 207 Fax (530) 529-4019

OPEN SPACE INCOME AND PRODUCTION QUESTIONNAIRE
OFFICIAL REQUEST

This official request is made in accordance with Section 441, Revenue and Taxation Code. This statement must be completed according to the instructions and filed with the Assessor.

Failure to file this statement will authorize the Assessor to estimate the value of your property based on information in his possession pursuant to Section 501, Revenue and Taxation Code.

This statement is not a public document. The information contained herein will be held secret by the Assessor (Sec. 451, Rev. & Tax. Code); it can be disclosed only to the district attorney, grand jury, and other agencies specified in Sec. 408 of the Rev. & Tax. Code. Attached schedules are considered to be part of the statement.

(PLEASE MAKE NECESSARY CORRECTIONS TO THE NAME OR ADDRESS ABOVE)

CONFIDENTIAL

RETURN IN 30 DAYS

CONFIDENTIAL

Dear Property Owner:

As you know, the law requires the Assessor to review all Williamson Act properties each year on the basis of earning ability. To do this, it is necessary that we annually obtain current data on income, rentals, expenses and production for the particular type of operation involved. Your cooperation is requested by furnishing this data on the total acreage you own that is under the Williamson Act. Please complete this questionnaire and return it to this office in the enclosed self-addressed envelope WITHIN 30 DAYS.

THIS FORM APPLIES TO YOUR TOTAL AG PRESERVE ACREAGE

Very truly yours,

ROBERT C. BROWNFIELD ASSESSOR, TEHAMA COUNTY

PLEASE ANSWER EACH QUESTION. If a question does not apply, Indicate "N/A" (Not applicable). Where necessary, attach schedules or lists to explain any further detail. Remarks may be entered on the back of this form.

1. Please check the current use(s) occurring on this property and the acreage of each.

- A. Irrigated field crops no. acres
 Irrigated pasture no. acres
 Orchard no. acres
 Vineyard no. acres
 Other (describe) _____
- Dry farming no. acres
 Dry grazing no. acres
 Dairy no. of cows milked
 Poultry no. of birds

B. Please indicate the type of operation:

- Cow-calf Stock-feeder Sheep Dairy Other _____

C. Please state average carrying capacity:

- Irrigating Pasture No. Head per Acre _____, Season from _____ to _____
 Dry Grazing No. Acres per Head _____, Season from _____ to _____

2. Do you lease or rent all or any portion of this property to others? Yes No

If yes, please answer the following for the past crop year:

A. Name of Tenant _____ Address _____

B. Number of net farmable acres rented or leased _____

C. Length of lease: From _____, _____ to _____, _____

D. Is rent based upon: Crop share, or Cash amount per acre. If share owners _____ %, Fertilizer \$ _____ Spray \$ _____

E. Total GROSS annual rent to owner for most recent year \$ _____

F. Date this went into effect: _____, _____

G. Does landowner pay the following expenses?

- Irrigation Water: Yes No \$ _____ per acre year.
 Irrigation Dist. Assessment: Yes No \$ _____ per acre year.
 Pump/pipeline expense: Yes No
 Fence/structure expense: Yes No
 Rental property taxes: Yes No
 Other (describe): _____

H. Does rent include structural improvements: Yes No If yes, please indicate annual rent allocated to the building(s).

- Residence \$ _____ Dairy \$ _____ Other _____ \$ _____
 Pump Pipeline Sprinklers