



**APPLICATION FOR  
PURCHASE AND TRANSFER OF LAND COVERAGE  
FROM THE NEVADA LAND BANK**

Please complete this application and mail or deliver to:  
Department of Conservation and Natural Resources, Division of State Lands  
Attn: Tahoe Land Agent  
901 S. Stewart Street, Ste 5003  
5<sup>th</sup> Floor, Richard Bryan Building  
Carson City, NV 89701

Applicant must complete a separate application for each Assessor's Parcel Number to which Applicant wishes to transfer Land Coverage.

This application must be submitted along with proper documentation and an application fee. The application fee is \$250.00.

Please make the check payable to "Nevada Division of State Lands".

In the event you have questions, please contact the Tahoe Land Agent for the Division of State Lands at: (775) 684-2735.

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This application is for the purchase of \_\_\_\_\_ square feet of Class \_\_\_\_\_ Land Coverage.

Hydrologic Transfer/Related Area (HRA): \_\_\_\_\_

- Incline Village (HRA 1)*
- Marlette (HRA 2)*
- Cave Rock (HRA 3)*
- South Stateline (HRA 4)*
- Agate Bay (HRA 9)*

Proposed start date for proposed project: \_\_\_\_\_

**Project Identification**

Please identify the property where the Land Coverage will be transferred:

Receiving Parcel APN: \_\_\_\_\_

Receiving Parcel Address: \_\_\_\_\_

\_\_\_\_\_

Receiving Parcel County: \_\_\_\_\_

Tahoe Regional Planning Agency (TRPA)

Conditional Permit No: **ERSP-** \_\_\_\_\_

TRPA Conditional Permit Applicant Name: \_\_\_\_\_

**Applicant Identification**

The following information should be supplied for the person who will be purchasing Land Coverage on behalf of the above project.

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Telephone: Office: \_\_\_\_\_ Cell: \_\_\_\_\_

Email: \_\_\_\_\_

Please describe the relationship of Applicant to the subject project (check all that apply).

- Applicant is:  The owner of the property.
- Agent or attorney-in-fact for property owner.
- Agent or attorney-in-fact for party with contract to purchase the property.
- Other- please specify: \_\_\_\_\_

**Documentation**

This application **must** be returned with the following documents/materials to assist us in our review:

- a. \_\_\_\_\_ Proof of ownership of the Receiving Parcel APN (copy of recorded Grant Deed).
- b. \_\_\_\_\_ If an agent is acting on behalf of the owner, a letter of authorization from the owner.
- c. \_\_\_\_\_ Copy of the TRPA conditional project permit.

*In the event these documents are not available at the time of filing this application, the application will be rejected.*

**Application Fee**

This application must be submitted by mail or in person, along with the application fee, made by check and payable to the **Nevada Division of State Lands**. In the event this application is not approved for processing, the application fee will be returned to applicant. In the event this application is approved for processing, the application fee will become non-refundable for any reason- including whether a Land Coverage transfer takes place. This fee is not applicable to the purchase price of the Land Coverage or any other fees or costs.

Applicant Initials \_\_\_\_\_

I understand that the amount of Land Coverage which I propose to purchase is subject to the review and approval of the Nevada Land Bank. I further understand that I will not be able to purchase more than the amount of Land Coverage which is required for the above project, and which can be transferred onto the subject property.

\_\_\_\_\_  
Applicant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Applicant

\_\_\_\_\_  
Date