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## Office of Nye County Recorder Deborah Beatty - Recorder

### **Declaration of Value Form Instructions**

- 1. Assessor Parcel Number(s):** List all Assessor Parcel Numbers (APN (s)) pertaining to the document. This number may be obtained from the Assessor's Office Pahrump (775)751-7060 or Tonopah (775)482-8174.
- 2. Type of Property:**
  - a. Type of Property:** Check all applicable types of property for each APN listed.
  - b. Property Tax Abatement:** Check the appropriate box in accordance with Nevada Law. For questions you may contact the Assessor's Office. Pahrump (775)751-7060 or Tonopah (775)482-8174..
- 3. Values:**
  - a. Total Value/ Sales Price:** Enter the full purchase price of the property. Purchase price is the amount paid or to be paid and includes all forms of consideration or value exchanged. If claiming an exemption enter \$0. Deed in Lieu of Foreclosure see below\*.
  - b. Deed in Lieu of Foreclosure Only (value of property):** This line is left blank unless it is a DIL. Deed in Lieu of Foreclosure see below\*.
  - c. Transfer Tax Value:** Enter full purchase price paid or to be paid. In the case of a gift, or a deed with nominal consideration, use the estimated fair market value. Deeds in Lieu of Foreclosure see below\*.
  - d. Real Property Transfer Tax Due:** The value is computed at a rate of \$1.95 per \$500.00 or portion thereof of cash value. Refer to the Real Property Transfer Tax Calculation document. If claiming an exemption enter \$0.
- \*Deed in Lieu of Foreclosure** - When the transfer involves a Deed in Lieu of Foreclosure, line 1 shows the amount of forgiven debt, line 2 shows the sales price within the last 5 years or assessors taxable value whichever is higher, and line 3 shows the transfer tax value (line 1 minus line 2= line 3). This may be a negative amount. In that case the transfer tax is zero; otherwise, transfer tax is paid on the remaining value.
- 4. If an Exemption is Claimed:**
  - a. If the transfer is not taxable, write the exemption number from the list of exemptions which can be found in NRS 375.090. Note: Some exemptions require backup.**
  - b. State the reason for the Exemption claimed. \*\* Proof required**  
**Exemption #1:** Requires the completion of the form Model Affidavit for Exemption 1. Documentation showing identical common ownership. \*\*  
**Exemption #3:** Recognizing true status of ownership, an explanation must also be written in the space provided and refer to the document # that this is correcting.  
**Exemption # 4:** Must state without consideration and prior document number.  
**Exemption #5:** Must state the relationship to the owner of the property. The owner of the property must be related to the person to whom it is conveyed within the first degree of lineal consanguinity or affinity.  
**Exemption #6:** In compliance of a divorce, you must provide a copy of the divorce decree.\*\*  
**Exemption #7:** Transfer to or from a trust without consideration.\*\*  
**Exemption #9:** Grantors must own 100% of the business / corporation / organization.\*\*  
**Exemption #10:** Deed upon death needs a prior document number.

- 5. Partial Interest:** If only a portion of interest is being conveyed, enter the percentage transferred and compute the transfer tax on the portion transferred. For instance, if 50% interest is being transferred, tax is computed on 50% of the taxable value. NOTE: When vesting into joint tenancy the transaction is taxable on the full 100% value.
- 6. Sign the Form:** This form requires one **wet** signature and they must state their capacity. Both the seller/grantor & buyer/grantee name and address are also required. If the person submitting the document for recording is not the seller/grantor or buyer/grantee they must complete the bottom portion labeled Company/ Person Requesting Recording.

**STATE OF NEVADA  
DECLARATION OF VALUE FORM**

1. Assessor Parcel Number(s)

a. \_\_\_\_\_  
b. \_\_\_\_\_  
c. \_\_\_\_\_  
d. \_\_\_\_\_

2a. Type of Property:

a. <input type="checkbox"/>	Vacant Land	b. <input type="checkbox"/>	Single Fam. Res.
c. <input type="checkbox"/>	Condo	d. <input type="checkbox"/>	2-4 Plex
e. <input type="checkbox"/>	Apt. Bldg.	f. <input type="checkbox"/>	Comm'l/Ind'l
g. <input type="checkbox"/>	Agricultural	h. <input type="checkbox"/>	Mobile Home
i. <input type="checkbox"/>	Other: _____		

2b. Property Tax Abatement per NRS 361.4723 and 361.4724:

a. Owner Occupied      b. Residential Rental Dwelling  
c. Other: \_\_\_\_\_

FOR RECORDER'S OPTIONAL USE ONLY

Notes: \_\_\_\_\_  
\_\_\_\_\_

\* Note, if not signed by the owner (grantee), Assessor will mail out separate form.

3. a. Total Value/Sales Price of Property: \$ \_\_\_\_\_  
b. Deed in Lieu of Foreclosure Only (value of property) (\$ \_\_\_\_\_)  
c. Transfer Tax Value: \$ \_\_\_\_\_  
d. Real Property Transfer Tax Due \$ \_\_\_\_\_

4. **If Exemption Claimed:**

a. Transfer Tax Exemption per NRS 375.090, Section: \_\_\_\_\_  
b. Explain Reason for Exemption: \_\_\_\_\_

5. Partial Interest: Percentage being transferred: \_\_\_\_\_ %

The undersigned declares and acknowledges, under penalty of perjury, pursuant to NRS 375.060, NRS 375.110, NRS 361.4723, and NRS 361.4724 that the information provided on this form is correct to the best of their information and belief and can be supported by documentation if called upon to substantiate the information provided herein. Furthermore, the parties agree that the disallowance of any claimed exemption and or abatement may result in a penalty. In addition, other determination of additional tax due, may result in a penalty of 10% of the tax due plus interest at 1% per month. Pursuant to NRS 375.030, the Buyer and Seller shall be jointly and severally liable for any additional amount owed.

Signature: \_\_\_\_\_

Capacity: \_\_\_\_\_

Signature: \_\_\_\_\_

Capacity: \_\_\_\_\_

**SELLER (GRANTOR) INFORMATION (REQUIRED)**

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

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

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

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

City: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

**BUYER (GRANTEE) INFORMATION (REQUIRED)**

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

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

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

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

City: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

**COMPANY/PERSON REQUESTING RECORDING (required if not seller or buyer)**

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

Escrow #: \_\_\_\_\_

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

\_\_\_\_\_

City: \_\_\_\_\_

\_\_\_\_\_

State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

\_\_\_\_\_

AS A PUBLIC RECORD THIS FORM MAY BE RECORDED/MICROFILMED