AIRCRAFT PROPERTY STATEMENT

Declaration of costs and other related property information as of 12:01 a.m., January 1, 20____

NAME AND MAILING ADDRESS

PLEASE NOTE: This form must be filed timely with the Assessor's office, regardless of the status of any Historical Aircraft Exemption Claim. Penalties will apply if not filed.

FILE RETURN BY:

FOR ASSESSOR'S USE ONLY

(Make necessary corr □	ections to the p	orinted name	e and mailing ad	ddress)	-				
I									
ECTION I: MUST BE COMP									
. FAA REGISTRATION NUMBER					AFT LOCATION (AIRPOR	T HANGAR OR T		NUMBER)	
N		()						,	
IANUFACTURER			MODEL					Ň	YEAR BUILT
			DUDCH	ASE DATE	PURCHASE PRICE				
			FURCHA	AGE DATE	\$				JUNTT
OR AIRCRAFT PREVIOUSLY RE	GISTERED O	R ASSE <mark>SS</mark> E	ED IN ANOTHE	R CALIFORN	1		ID ASSES	SMENT YEAR	S
IXED BASE OPERATOR NAME				LAST MAJO	R AIRFRAME OVERHAUL	DATE: C	OST:		
. AIRCRAFT CONDITION:						I +		_	
	W GOO	ם חר	AVERAGE	POOR	DAMAGE HISTORY				
			AVERAGE			YES. SEE INST	RUCTIONS	S AND ATTACH	STATEMEN
			AVERAGE	POOR	EQUIPMENT LEASE	<i>,</i>			
			AVERAGE	POOR		YES, SEE INST	RUC <mark>TIO</mark> NS	S AND ATTACH	H SCHEDULE
XTERIOR NEV			L						
. TYPE OF USAGE:				ARTER/TAXI					HOW/MUSEL
. TYPE OF USAGE: PERSONAL/PLEASURE IF YOU CHECKED CHAR	ELIGHT TRAIN	YOU USE T	HE AIRCRAFT		CARRIAGE MORE THAN	50% OF THE TI	м <mark>е?</mark> 🗌 `	DGRAM SH	IOW/MUSEL
. TYPE OF USAGE: PERSONAL/PLEASURE F IF YOU CHECKED CHAR	ELIGHT TRAIN TER/TAXI, DO NOTE: COMM	YOU USE T ON CARRIA	HE AIRCRAFT	TIN COMM <mark>ON</mark> TINCLUDE F	I CARRIAGE MORE THAN ERRY FLIGHTS OR PART	50% OF THE TI 91 OWNER FLIC	M <mark>E?</mark> []] GHTS.	YES NO	IOW/MUSEL
TYPE OF USAGE: PERSONAL/PLEASURE F IF YOU CHECKED CHAR	ELIGHT TRAIN TER/TAXI, DO NOTE: COMM	YOU USE T ON CARRIA ONLY ADDE	HE AIRCRAFT	TIN COMM <mark>ON</mark> TINCLUDE F	CARRIAGE MORE THAN	91 50% OF THE TI 91 OWNER FLIC GINAL STANDAR	M <mark>E?</mark> []] GHTS.	YES NO	IOW/MUSEL
. TYPE OF USAGE: PERSONAL/PLEASURE F IF YOU CHECKED CHAR	ELIGHT TRAIN TER/TAXI, DO NOTE: COMM	YOU USE T ON CARRIA ONLY ADDE FOR CONI	HE AIRCRAFT	TIN COMM <mark>ON</mark> TINCLUDE F	CARRIAGE MORE THAN ERRY FLIGHTS OR PART S. DO NOT REPORT ORI	91 50% OF THE TI 91 OWNER FLIC GINAL STANDAR	M <mark>E?</mark> []] GHTS.	YES NO	HOW/MUSEL
. TYPE OF USAGE: PERSONAL/PLEASURE F IF YOU CHECKED CHAR . AVIONICS SUMMA	FLIGHT TRAIN TER/TAXI, DO NOTE: COMM ARY: REPORT	YOU USE T ON CARRIA ONLY ADDE FOR CONI	HE AIRCRAFT GE DOES NO ED OR REPLAC DITION, PLEAS	IN COMMON T INCLUDE F CED AVIONIC SE ENTER (N ASSESSOR	I CARRIAGE MORE THAN ERRY FLIGHTS OR PART S. DO NOT REPORT ORI) NEW, (A) AVERAGE, (P)	50% OF THE TI 91 OWNER FLIC GINAL STANDAR POOR. ACQUISITION	ME? () GHTS. RD FACTO	YES NO	ASSESSOR
	FLIGHT TRAIN TER/TAXI, DO NOTE: COMM ARY: REPORT	YOU USE T ON CARRIA ONLY ADDE FOR CONI	HE AIRCRAFT GE DOES NO ED OR REPLAC DITION, PLEAS	IN COMMON T INCLUDE F CED AVIONIC SE ENTER (N ASSESSOR	I CARRIAGE MORE THAN ERRY FLIGHTS OR PART S. DO NOT REPORT ORI) NEW, (A) AVERAGE, (P) UNIT	50% OF THE TI 91 OWNER FLIC GINAL STANDAR POOR. ACQUISITION	ME? () GHTS. RD FACTO	YES NO	ASSESSOR
	FLIGHT TRAIN TER/TAXI, DO NOTE: COMM ARY: REPORT	YOU USE T ON CARRIA ONLY ADDE FOR CONI	HE AIRCRAFT GE DOES NO ED OR REPLAC DITION, PLEAS	TIN COMMON TINCLUDE F CED AVIONIC SE ENTER (N ASSESSOR	CARRIAGE MORE THAN ERRY FLIGHTS OR PART S. DO NOT REPORT ORI NEW, (A) AVERAGE, (P) UNIT RADAR ALTIMETER	50% OF THE TI 91 OWNER FLIC GINAL STANDAR POOR. ACQUISITION	ME? () GHTS. RD FACTO	YES NO	ASSESSOR
	FLIGHT TRAIN TER/TAXI, DO NOTE: COMM ARY: REPORT	YOU USE T ON CARRIA ONLY ADDE FOR CONI	HE AIRCRAFT GE DOES NO ED OR REPLAC DITION, PLEAS	TIN COMMON TINCLUDE F CED AVIONIC SE ENTER (N ASSESSOR	CARRIAGE MORE THAN ERRY FLIGHTS OR PART S. DO NOT REPORT ORI NEW, (A) AVERAGE, (P) UNIT RADAR ALTIMETER ENCODER RMI RADIO MAGNETIC INDICATOR	50% OF THE TI 91 OWNER FLIC GINAL STANDAR POOR. ACQUISITION	ME? () GHTS. RD FACTO	YES NO	ASSESSOR
	FLIGHT TRAIN TER/TAXI, DO NOTE: COMM ARY: REPORT	YOU USE T ON CARRIA ONLY ADDE FOR CONI	HE AIRCRAFT GE DOES NO ED OR REPLAC DITION, PLEAS	TIN COMMON TINCLUDE F CED AVIONIC SE ENTER (N ASSESSOR	CARRIAGE MORE THAN ERRY FLIGHTS OR PART S. DO NOT REPORT ORI) NEW, (A) AVERAGE, (P) UNIT RADAR ALTIMETER ENCODER	50% OF THE TI 91 OWNER FLIC GINAL STANDAR POOR. ACQUISITION	ME? () GHTS. RD FACTO	YES NO	ASSESSOR
	FLIGHT TRAIN TER/TAXI, DO NOTE: COMM ARY: REPORT	YOU USE T ON CARRIA ONLY ADDE FOR CONI	HE AIRCRAFT GE DOES NO ED OR REPLAC DITION, PLEAS	TIN COMMON TINCLUDE F CED AVIONIC SE ENTER (N ASSESSOR	CARRIAGE MORE THAN ERRY FLIGHTS OR PART S. DO NOT REPORT ORI NEW, (A) AVERAGE, (P) UNIT RADAR ALTIMETER ENCODER RMI RADIO MAGNETIC INDICATOR VLF VERY LOW FREQUENCY PHONE	50% OF THE TI 91 OWNER FLIC GINAL STANDAR POOR. ACQUISITION	ME? () GHTS. RD FACTO	YES NO	ASSESSOR
	FLIGHT TRAIN TER/TAXI, DO NOTE: COMM ARY: REPORT	YOU USE T ON CARRIA ONLY ADDE FOR CONI	HE AIRCRAFT GE DOES NO ED OR REPLAC DITION, PLEAS	TIN COMMON TINCLUDE F CED AVIONIC SE ENTER (N ASSESSOR	CARRIAGE MORE THAN ERRY FLIGHTS OR PART S. DO NOT REPORT ORI NEW, (A) AVERAGE, (P) UNIT RADAR ALTIMETER ENCODER RMI RADIO MAGNETIC INDICATOR VLF VERY LOW FREQUENCY PHONE RADAR	50% OF THE TI 91 OWNER FLIC GINAL STANDAR POOR. ACQUISITION	ME? () GHTS. RD FACTO	YES NO	ASSESSOR
	FLIGHT TRAIN TER/TAXI, DO NOTE: COMM ARY: REPORT	YOU USE T ON CARRIA ONLY ADDE FOR CONI	HE AIRCRAFT GE DOES NO ED OR REPLAC DITION, PLEAS	TIN COMMON TINCLUDE F CED AVIONIC SE ENTER (N ASSESSOR	CARRIAGE MORE THAN ERRY FLIGHTS OR PART S. DO NOT REPORT ORI NEW, (A) AVERAGE, (P) UNIT RADAR ALTIMETER ENCODER RMI RADIO MAGNETIC INDICATOR VLF VERY LOW FREQUENCY PHONE	50% OF THE TI 91 OWNER FLIC GINAL STANDAR POOR. ACQUISITION	ME? () GHTS. RD FACTO	YES NO	ASSESSOR
	FLIGHT TRAIN TER/TAXI, DO NOTE: COMM ARY: REPORT	YOU USE T ON CARRIA ONLY ADDE FOR CONI	HE AIRCRAFT GE DOES NO ED OR REPLAC DITION, PLEAS	TIN COMMON TINCLUDE F CED AVIONIC SE ENTER (N ASSESSOR	I CARRIAGE MORE THAN ERRY FLIGHTS OR PART S. DO NOT REPORT ORI NEW, (A) AVERAGE, (P) UNIT RADAR ALTIMETER ENCODER RMI RADIA MAGNETIC INDICATOR VLF VERY LOW FREQUENCY PHONE RADAR LORAN ADF	50% OF THE TI 91 OWNER FLIC GINAL STANDAR POOR. ACQUISITION	ME? () GHTS. RD FACTO	YES NO	ASSESSOR
	FLIGHT TRAIN TER/TAXI, DO NOTE: COMM ARY: REPORT	YOU USE T ON CARRIA ONLY ADDE FOR CONI	HE AIRCRAFT GE DOES NO ED OR REPLAC DITION, PLEAS	TIN COMMON TINCLUDE F CED AVIONIC SE ENTER (N ASSESSOR	CARRIAGE MORE THAN ERRY FLIGHTS OR PART S. DO NOT REPORT ORI NEW, (A) AVERAGE, (P) UNIT RADAR ALTIMETER ENCODER RMI RADIO MAGNETIC INDICATOR VLF VERY LOW FREQUENCY PHONE RADAR LORAN	50% OF THE TI 91 OWNER FLIC GINAL STANDAR POOR. ACQUISITION	ME? () GHTS. RD FACTO	YES NO	ASSESSOR
	FLIGHT TRAIN TER/TAXI, DO NOTE: COMM ARY: REPORT	YOU USE T ON CARRIA ONLY ADDE FOR CONI	HE AIRCRAFT GE DOES NO ED OR REPLAC DITION, PLEAS	TIN COMMON TINCLUDE F CED AVIONIC SE ENTER (N ASSESSOR	CARRIAGE MORE THAN ERRY FLIGHTS OR PART S. DO NOT REPORT ORI NEW, (A) AVERAGE, (P) UNIT RADAR ALTIMETER ENCODER RMI RADIO MAGNETIC INDICATOR VLF VERY LOW FREQUENCY PHONE RADAR LORAN ADF AUTOMATIC DIRECTION FINDER DME	50% OF THE TI 91 OWNER FLIC GINAL STANDAR POOR. ACQUISITION	ME? () GHTS. RD FACTO	YES NO	ASSESSOR
	FLIGHT TRAIN TER/TAXI, DO NOTE: COMM ARY: REPORT	YOU USE T ON CARRIA ONLY ADDE FOR CONI	HE AIRCRAFT GE DOES NO ED OR REPLAC DITION, PLEAS	TIN COMMON TINCLUDE F CED AVIONIC SE ENTER (N ASSESSOR	CARRIAGE MORE THAN ERRY FLIGHTS OR PART S. DO NOT REPORT ORI NEW, (A) AVERAGE, (P) UNIT RADAR ALTIMETER ENCODER RADIO MAGNETIC INDICATOR VLF VERY LOW FREQUENCY PHONE RADAR LORAN ADF AUTOMATIC DIRECTION FINDER DME DISTANCE MEASURING EQUIPMENT	50% OF THE TI 91 OWNER FLIC GINAL STANDAR POOR. ACQUISITION	ME? () GHTS. RD FACTO	YES NO	ASSESSOR
	FLIGHT TRAIN TER/TAXI, DO NOTE: COMM ARY: REPORT	YOU USE T ON CARRIA ONLY ADDE FOR CONI	HE AIRCRAFT GE DOES NO ED OR REPLAC DITION, PLEAS	TIN COMMON TINCLUDE F CED AVIONIC SE ENTER (N ASSESSOR	CARRIAGE MORE THAN ERRY FLIGHTS OR PART S. DO NOT REPORT ORI NEW, (A) AVERAGE, (P) UNIT RADAR ALTIMETER ENCODER RMI RADIO MAGNETIC INDICATOR VLF VERY LOW FREQUENCY PHONE RADAR LORAN ADF AUTOMATIC DIRECTION FINDER DME DME DME DME DME DME DME AIR CONDITIONING	50% OF THE TI 91 OWNER FLIC GINAL STANDAR POOR. ACQUISITION	ME? () GHTS. RD FACTO	YES NO	ASSESSOR
	FLIGHT TRAIN TER/TAXI, DO NOTE: COMM ARY: REPORT	YOU USE T ON CARRIA ONLY ADDE FOR CONI	HE AIRCRAFT GE DOES NO ED OR REPLAC DITION, PLEAS	TIN COMMON TINCLUDE F CED AVIONIC SE ENTER (N ASSESSOR	ADF AUTOMATIC DIRECTION FINDER DME DME DME DME DME DME DME DME DME DME	50% OF THE TI 91 OWNER FLIC GINAL STANDAR POOR. ACQUISITION	ME? () GHTS. RD FACTO	YES NO	ASSESSOR

EF-577-R07-0518-14000176-2 BOE-577 (P2) REV. 07 (05-18) SECTION I: (continued)

PLEASE ENTER INFORMATION AS OF JANUARY 1 OF THIS YEAR.

	ENGINE(S)	SINGLE	LEFT	RIGHT			DC.
	MAKE						KJ
	MODEL						
	YEAR OF MANUFACTURE					COPTERS - HOURS SINC	
	HORSEPOWER				ENGINE	MAIN ROTOR	MAIN ROTOR
	HOURS SINCE NEW					BLADES	HEAD ASSEMBLY
	HOURS SINCE MAJOR OVERHAUL				MAST	MAST TRANSMISSION	TAIL ROTOR DRIVESHAFT
ļ	TIME BETWEEN OVERHAULS (TBO)				TAIL ROTOR	TAIL ROTOR HUB	TAIL ROTOR
	HOURS SINCE MIDLIFE				GEARBOX	ASSEMBLY	BLADES
H	DATE OF MAJOR OVERHAUL				SERVOS	MISCELLANEOUS	
L	DATE OF LANDING GEAR OVERHAU						
	GINE MAINTENANCE SERVI	CE PROGRAM: 🔄 Y	ES NO				
	ME OF PROGRAM: R HOMEBUILT, KIT, OR EXPE					DATE:	
	CTION II: COMPLETE IF FIRS				LAST CALENDA		
IAI	ME		ADDF	RESS			
	M						┓
TI	Y			STAT	E ZIP CODE	COUNTY	
	IRCRAFT WAS SOLD, ATTACH A Sold or donated: Date of						
- 0	DAIL OF	OALL	SALE \$	PRICE			
١E٧	W OWNER NAME		ADDF	RESS			
	-						
TI	Y			STAT	E ZIP CODE	COUNTY	
: [
				DONED			_
DAT	TE NEW LOCATIO					COUNTY	-
EXF	PLANATION				11		
٩IR	CRAFT NOT HABITUALLY BASE						
١R	PORT/FBO WHERE NORMALLY	KEPT				HANGAR/TIE-DOWN	NO.
	Y			STATI	E ZIP CODE	COUNTY	
ידוכ					N TRANSIT TO:		
		VAS IN THIS COUNTY	DEDAIDO		IN TRANSIT TO.		
	ECK REASON AIRCRAFT IS OR V	VAS IN THIS COUNTY:					
	ECK REASON AIRCRAFT IS OR V				OTHER:		
		EGARDING ANY ADD			EL WOULD ASS		OUR AIRCRAFT.
HE	ECK REASON AIRCRAFT IS OR V ATTACH STATEMENT RE		TIONAL INFOR	RMATION YOU FE	EL WOULD ASS	RS NAMES.	OUR AIRCRAFT.
OV	ATTACH STATEMENT RE	EGARDING ANY ADD IF OWNERSHIP TY	UTIONAL INFOR	RMATION YOU FE EASE ATTACH A DECLARATION	EL WOULD ASS LIST OF MEMBE	RS NAMES. E	
OV	ATTACH STATEMENT RE	EGARDING ANY ADD IF OWNERSHIP TY	UTIONAL INFOR	RMATION YOU FE EASE ATTACH A DECLARATION	EL WOULD ASS LIST OF MEMBE	RS NAMES.	
COV Pro Pa	ATTACH STATEMENT RE MNERSHIP TYPE (☑) oprietorship □ No artnership □ I certify	EGARDING ANY ADD IF OWNERSHIP Ty te: The following dea (or declare) under p	PITIONAL INFOR PE IS LLC, PLE claration must penalty of perjur	RMATION YOU FE ASE ATTACH A DECLARATION be completed ar y under the laws	EL WOULD ASS LIST OF MEMBE I BY ASSESSE Ind signed. If you of the State of (RS NAMES. E do not do so, it may r California that I have ex	esult in penalties. xamined this proper
OW Pro Pa Co	ATTACH STATEMENT RE	EGARDING ANY ADD IF OWNERSHIP Ty te: The following dev (or declare) under p ent, including accompa	PITIONAL INFOR PE IS LLC, PLE claration must penalty of perjur anying schedule	MATION YOU FE EASE ATTACH A DECLARATION be completed ar y under the laws s, statements or c	EL WOULD ASS LIST OF MEMBE I BY ASSESSE Ind signed. If you of the State of (other attachments,	RS NAMES. E do not do so, it may r California that I have ex and to the best of my k	esult in penalties. xamined this proper
OW Pro Pa Co	ATTACH STATEMENT RE	EGARDING ANY ADD IF OWNERSHIP TY te: The following dea (or declare) under p ent, including accompa correct, and complete	Claration must benalty of perjur anying schedule and includes all	MATION YOU FE EASE ATTACH A DECLARATION be completed ar y under the laws s, statements or c property required	EL WOULD ASS LIST OF MEMBE I BY ASSESSE Ind signed. If you of the State of (ther attachments, to be reported with	RS NAMES. E do not do so, it may r California that I have ex	esult in penalties. xamined this proper mowledge and belief possessed, controlle
OV Pro Pa Otl	ATTACH STATEMENT RE	te: The following der (or declare) under p (in comparison of the c	Claration must benalty of perjur anying schedule and includes all	MATION YOU FE EASE ATTACH A DECLARATION be completed ar y under the laws s, statements or c property required	EL WOULD ASS LIST OF MEMBE I BY ASSESSE Ind signed. If you of the State of (ther attachments, to be reported with	RS NAMES. E do not do so, it may r California that I have ex and to the best of my k hich is owned, claimed, j at 12:01 a.m. on Januar	esult in penalties. xamined this proper mowledge and belief possessed, controlle
OV Pro Pa Ott	ATTACH STATEMENT RE ATTACH STATEMENT RE WNERSHIP TYPE (ID) oprietorship orporation her I certify stateme is true, o NATURE OF ASSESSEE OR AUTHOR	EGARDING ANY ADD IF OWNERSHIP TY ate: The following dea of (or declare) under p ent, including accompa correct, and complete or managed by the IZED AGENT*	Claration must benalty of perjur anying schedule and includes all	MATION YOU FE EASE ATTACH A DECLARATION be completed ar y under the laws s, statements or c property required	EL WOULD ASS LIST OF MEMBE I BY ASSESSE Ind signed. If you of the State of C ther attachments, to be reported wi in this statement a	RS NAMES. E do not do so, it may r California that I have ex and to the best of my k hich is owned, claimed, j at 12:01 a.m. on Januar TE	esult in penalties. xamined this proper mowledge and belief possessed, controlle
OV Pro Pa Co Ottl	ATTACH STATEMENT RE ATTACH STATEMENT RE WNERSHIP TYPE (☑) oprietorship □ her □ her □ VN	EGARDING ANY ADD IF OWNERSHIP TY ate: The following dea of (or declare) under p ent, including accompa correct, and complete or managed by the IZED AGENT*	Claration must benalty of perjur anying schedule and includes all	MATION YOU FE EASE ATTACH A DECLARATION be completed ar y under the laws s, statements or c property required	EL WOULD ASS LIST OF MEMBE I BY ASSESSE Ind signed. If you of the State of (ther attachments, to be reported wi in this statement a	RS NAMES. E do not do so, it may r California that I have ex and to the best of my k hich is owned, claimed, j at 12:01 a.m. on Januar TE	esult in penalties. xamined this proper mowledge and belief possessed, controlled
	ATTACH STATEMENT RE ATTACH STATEMENT RE WNERSHIP TYPE (ID) oprietorship orporation her I certify stateme is true, o NATURE OF ASSESSEE OR AUTHOR	EGARDING ANY ADD IF OWNERSHIP TY te: The following dea (or declare) under p ent, including accompa correct, and complete or managed by the IZED AGENT*	Claration must benalty of perjur anying schedule and includes all	MATION YOU FE EASE ATTACH A DECLARATION be completed ar y under the laws s, statements or c property required	EL WOULD ASS LIST OF MEMBE I BY ASSESSE Ind signed. If you of the State of O other attachments, I to be reported wi in this statement of DA	RS NAMES. E do not do so, it may r California that I have ex and to the best of my k hich is owned, claimed, j at 12:01 a.m. on Januar TE	esult in penalties. xamined this proper mowledge and belief possessed, controlled y 1, 20
	ECK REASON AIRCRAFT IS OR W ATTACH STATEMENT RE WNERSHIP TYPE (☑) oprietorship No artnership I certify oproration I certify ther is true, of NATURE OF ASSESSEE OR AUTHORIZED A	EGARDING ANY ADD IF OWNERSHIP TY te: The following dea (or declare) under p ent, including accompa correct, and complete or managed by the IZED AGENT*	Claration must benalty of perjur anying schedule and includes all	MATION YOU FE EASE ATTACH A DECLARATION be completed ar y under the laws s, statements or c property required	EL WOULD ASS LIST OF MEMBE I BY ASSESSE Ind signed. If you of the State of O other attachments, I to be reported wi in this statement of DA	RS NAMES. E do not do so, it may r California that I have ex and to the best of my k hich is owned, claimed, p at 12:01 a.m. on Januar TE LE	esult in penalties. xamined this proper mowledge and belief possessed, controlle y 1, 20
	ECK REASON AIRCRAFT IS OR W ATTACH STATEMENT RE WNERSHIP TYPE (☑) oprietorship No artnership I certify oproration I certify ther is true, of NATURE OF ASSESSEE OR AUTHORIZED A	EGARDING ANY ADD IF OWNERSHIP TY te: The following dea (or declare) under p ent, including accompa correct, and complete or managed by the IZED AGENT* (typed or printed)	Claration must benalty of perjur anying schedule and includes all	MATION YOU FE EASE ATTACH A DECLARATION be completed ar y under the laws s, statements or c property required	EL WOULD ASS LIST OF MEMBE I BY ASSESSE Ind signed. If you of the State of O other attachments, I to be reported wi in this statement of DA TIT FEI	RS NAMES. E do not do so, it may r California that I have ex and to the best of my k hich is owned, claimed, j at 12:01 a.m. on Januar TE LE DERAL EMPLOYER ID NUMBE	esult in penalties. xamined this proper mowledge and belief possessed, controlle y 1, 20
	ECK REASON AIRCRAFT IS OR W ATTACH STATEMENT RE WNERSHIP TYPE (☑) oprietorship No artnership I oproration I ther I INATURE OF ASSESSEE OR AUTHORIZED A ME OF LEGAL ENTITY (other than DBA, EPARER'S NAME AND ADDRESS (type	EGARDING ANY ADD IF OWNERSHIP TY te: The following dea (or declare) under p ent, including accompa correct, and complete or managed by the IZED AGENT* (typed or printed)	Claration must benalty of perjur anying schedule and includes all	RMATION YOU FE ASE ATTACH A DECLARATION be completed ar y under the laws s, statements or c property required as the assessee	EL WOULD ASS LIST OF MEMBE I BY ASSESSE Ind signed. If you of the State of O other attachments, I to be reported wi in this statement of DA TIT FEI	RS NAMES. E do not do so, it may r California that I have ex and to the best of my k hich is owned, claimed, j at 12:01 a.m. on Januar TE LE DERAL EMPLOYER ID NUMBE	esult in penalties. xamined this proper mowledge and belief possessed, controlled y 1, 20
	ECK REASON AIRCRAFT IS OR W ATTACH STATEMENT RE WNERSHIP TYPE (☑) oprietorship No artnership I certify oproration I certify ther Is true, of WNATURE OF ASSESSEE OR AUTHORIZED A ME OF LEGAL ENTITY (other than DBA,	EGARDING ANY ADD IF OWNERSHIP TY te: The following dea (or declare) under p ent, including accompa correct, and complete or managed by the IZED AGENT* (typed or printed)	Claration must benalty of perjur anying schedule and includes all	RMATION YOU FE ASE ATTACH A DECLARATION be completed ar y under the laws s, statements or c property required as the assessee	EL WOULD ASS LIST OF MEMBE I BY ASSESSE Ind signed. If you of the State of O other attachments, I to be reported wi in this statement of DA TIT FEI	RS NAMES. E do not do so, it may r California that I have ex and to the best of my k hich is owned, claimed, j at 12:01 a.m. on Januar TE LE DERAL EMPLOYER ID NUMBE	esult in penalties. xamined this proper mowledge and belief possessed, controlled y 1, 20
	ECK REASON AIRCRAFT IS OR W ATTACH STATEMENT RE WNERSHIP TYPE (☑) oprietorship No artnership I oproration I ther I INATURE OF ASSESSEE OR AUTHORIZED A ME OF LEGAL ENTITY (other than DBA, EPARER'S NAME AND ADDRESS (type	EGARDING ANY ADD IF OWNERSHIP TY ate: The following dea (or declare) under pr ent, including accompa- correct, and complete or managed by the IZED AGENT* AGENT* (typed or printed) (typed or printed)	DITIONAL INFOR PE IS LLC, PLE claration must penalty of perjur anying schedule and includes all person named	RMATION YOU FE ASE ATTACH A DECLARATION be completed ar y under the laws s, statements or c property required as the assessee	EL WOULD ASS IST OF MEMBE I BY ASSESSE I BY ASSESSE of signed. If you of the State of C ther attachments, to be reported wi in this statement a MBER TIT MBER TIT	RS NAMES. E do not do so, it may r California that I have ex and to the best of my k hich is owned, claimed, j at 12:01 a.m. on Januar TE LE DERAL EMPLOYER ID NUMBE	esult in penalties. xamined this proper mowledge and belief possessed, controlled y 1, 20

OFFICIAL REQUEST

Pursuant to California Revenue and Taxation Code section 5362, the Assessor of the county in which an aircraft is habitually situated shall assess the aircraft at its market value. The Assessor's records indicate that you are the owner of the aircraft identified on page 1 of this form. In accordance with section 5365, you are required to complete this form according to the instructions. Pursuant to section 5367, failure to return this form by the specified due date will require the Assessor to add a 10% penalty to the market value of your aircraft.

This statement is not a public document. In accordance with Revenue and Taxation Code section 451, the information contained herein will be held secret by the Assessor. It can only be disclosed to the district attorney, grand jury, and other agencies specified in section 408. Attached schedules are considered to be part of the statement.

GENERAL INSTRUCTIONS

ALL INFORMATION PROVIDED SHOULD BE AS OF JANUARY 1.

SECTION I.

This section must be completed annually. Specific information is required to correctly determine the value of the aircraft

STATEMENT OF CONDITION: Using the information below, check the box that reflects the condition of your aircraft as of January 1:

New: An aircraft that is new or is maintained in new condition.

Good: Paint and airframe are in near new condition. Minor scratches. Windows clear with no crazing or discoloration. Interior is in near new condition. Simple cleaning removes any smell, dirt or matting.

Average: Paint is generally sound and attractive. Slight oxidation can be easily polished out leaving paint shiny. Small scratches, chips or dents can be found especially in high use areas. Windows have milky edges, some crazing or light scratches. The interior use shows minor fraying, stains, or cracking. Cleaning and shampooing will make the interior look attractive. Aircraft certificate is current, 6 months annual, ½ TBO (Time Between Overhauls), ADs (Air Worthiness Directives) complied.

Poor: Paint is badly oxidized, peeled and blemished. Most leading edges and upper surfaces are chipped, crazed, dented, and oxidized. All windows crazed and scratched. After touch-up and polishing, aircraft still looks unsightly. Needs new paint. Interior shows high use, scratches, tear, snags, frayed fabric, exposed foam, peeling laminates, and loose panels. Interior looks and smells dirty after cleaning and needs replacement. Aircraft has not flown, is out of annual, engine is run out and will not pass inspection, ADs not complied.

AVIONICS SUMMARY: Indicate the date of acquisition and the condition of existing avionics equipment. List any additional avionics and their cost under "Non-factory avionics added in last calendar year." For condition, please enter N for new, A for average, and P for poor.

DAMAGE HISTORY: To report damage history, attach a statement indicating the type of damage, date of damage, copy of report made to FAA, and maintenance log and repairs made.

EQUIPMENT LEASED, EXCHANGED, ADDED OR RETIRED:

Leased: If you lease equipment in connection with this aircraft's operation, attach a schedule listing the name and address of the owner, description of the leased property, cost if purchased, and annual rent.

Exchanged: Attach a schedule listing any exchange of equipment since purchase.

Additions or Retirements: From date of acquisition of aircraft to last day in December of last year if you have added or retired equipment, attach a schedule listing the description of the equipment, date added or retired, and the cost of equipment added or retired.

FRACTIONAL OWNERSHIP: If the aircraft is enrolled in a Fractional Ownership Program, forms BOE-570-FO (-1, -2) must be filed.

SECTION II.

This section must be completed if filing for the first time or if there have been any changes within the last calendar year.

ADDITIONAL INFORMATION: Attach a statement regarding any additional information you feel would assist the Assessor in valuing your aircraft.

DECLARATION BY ASSESSEE

The law requires that this property statement, regardless of where it is executed, shall be declared to be true under penalty of perjury under the laws of the State of California. The declaration must be signed by the assessee, a duly appointed fiduciary, or a person authorized to sign on behalf of the assessee. In the case of a corporation, the declaration must be signed by an officer or by an employee or agent who has been designated in writing by the board of directors, by name or by title, to sign the declaration on behalf of the corporation. In the case of a partnership, the declaration must be signed by a partner or an authorized employee or agent. In the case of a Limited Liability Company (LLC), the declaration must be signed by an employee or agent where there is no manager, or by an employee or agent designated by the LLC manager or by the members to sign on behalf of the LLC.

When signed by an employee or agent, other than a member of the bar, a certified public accountant, a public accountant, an enrolled agent or a duly appointed fiduciary, the assessee's written authorization of the employee or agent to sign the declaration on behalf of the assessee must be filed with the Assessor. The Assessor may at any time require a person who signs a property statement and who is required to have written authorization to provide proof of authorization.

A property statement that is not signed and executed in accordance with the foregoing instructions is not validly filed. The penalty imposed by section 463 of the Revenue and Taxation Code for failure to file is applicable to unsigned property statements.

EXEMPTIONS

Armed Forces Members. If you are not a resident of the State of California, but are in this state solely by the reason of compliance with military orders, you may declare tax situs elsewhere by filing Form BOE-261-D, Servicemembers Civil Relief Act Declaration. Obtain the declaration form from the Assessor or from your unit Legal Officer.

Aircraft of Historical Significance. If you are an individual owner who does not hold the aircraft primarily for purposes of sale, does not use the aircraft for commercial purposes or general transportation, the aircraft is 35 years or older and is displayed to the public at least 12 days per year, obtain Form BOE-260-B from the Assessor. The exemption claim must be filed on or before February 15 for a full exemption and by August 1 for a partial exemption.

