EF-577-A-R02-0809-20000170-1 BOE-577-A REV. 02 (08-09)

> 20 \_\_\_\_\_ AIRPORT OPERATIONS REPORT



## **Brett Frazier Madera County Assessor**

200 West 4th Street Madera, CA 93637-3548 Phone: (559) 675-7710 Fax: (559) 675-7654

www.maderacounty.com/government/assessor

TO OWNERS AND OPERATORS OF PRIVATE AND PUBLIC AIRPORTS: Section 5368 of the Revenue and Taxation Code requires this form to be completed and returned to the County Assessor upon request. Pursuant to this section, the County Assessor hereby requests information regarding the aircraft registration number, make, model and arrival and departure information of all aircraft utilizing your airport facilities for the calendar year. The requested information may be provided in electronic format.

AIRCRAFT REGISTRATION AIRCRAFT TYPE MAKE AND MODEL (FLIGHT NUMBER) INDICATE IF ARRIVAL OR DEPARTURE  LOCAL TIME AND DAY  (FLIGHT NUMBER)  LOCAL TIME AND DAY  (FLIGHT NUMBER)	ΓΕ 
AIRCRAFT REGISTRATION NUMBER AIRCRAFT TYPE MAKE AND MODEL (FLIGHT NUMBER) INDICATE IF ARRIVAL OR DEPARTURE LOCAL TIME AND DAY	 ΓΕ
AIRCRAFT REGISTRATION NUMBER AND MODEL AIRCRAFT IDENTIFICATION DEPARTURE LOCAL TIME AND DAIRCRAFT REGISTRATION NUMBER LOCAL TIME AND DAIRCRAFT IDENTIFICATION DEPARTURE	ΤΕ 
SAMPLE!	
SAMELE!	

## **CERTIFICATION**

I certify (or declare) under penalty of perjury under the laws of the State of California that the foregoing and all information hereon, including any accompanying statements or documents, is true and correct to the best of my knowledge and belief.

, , ,	•
SIGNATURE	DATE
<b>&gt;</b>	
NAME	TITLE
E-MAIL ADDRESS	DAYTIME TELEPHONE
	( )

THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION

