



Peter Aldana
Assessor-County Clerk-Recorder

County of Riverside
PO Box 751
Riverside, CA 92502-0751
Phone: (951) 955-6200
https://www.asrckrec.com/

CLAIM FOR EXEMPTION FROM PROPERTY TAXES OF AIRCRAFT OF HISTORICAL SIGNIFICANCE

This claim must be filed annually by 5:00 p.m., February 15, for the preceding January 1 lien date to receive a full 100% exemption. An 80% exemption is available if this affidavit is filed between February 16 - August 1.

NAME AND MAILING ADDRESS (Make necessary corrections to the printed name and mailing address.)

[] []

[] []

If you no longer seek an exemption at this location, check [] Sign and return this form to the Assessor
Date sold/no longer used for exempt purpose: _____

SECTION 1: CLAIMANT INFORMATION

NAME OF OWNER
NAME OF CLAIMANT (if different from owner)
ADDRESS OF CLAIMANT (number, street, city, state, zip code)
EMAIL ADDRESS DAYTIME PHONE NUMBER ()

SECTION 2: AIRCRAFT INFORMATION

FAA REGISTRATION NUMBER HOURS IN OPERATION LAST YEAR AIRFRAME HOURS AS OF JANUARY 1
N
MANUFACTURER MODEL YEAR BUILT
AIRCRAFT LOCATION AS OF 12:01 A.M., JANUARY 1 (AIRPORT, HANGAR OR TIE-DOWN NUMBER)

Check the appropriate box:

- [] Original [] Restored [] Replica [] Fewer than Five

- 1. Is the aircraft considered airworthy? [] YES [] NO
2. Do you hold the aircraft primarily for purposes of sale? [] YES [] NO
3. Do you use the aircraft for any general transportation or commercial purposes? [] YES [] NO

SECTION 3: FIRST-TIME FILERS

A fee of \$35 will be charged by the assessor upon the initial application for an exemption. This is a one-time only, non-refundable fee.

If the aircraft was first made available for public display less than 12 days prior to the lien date (January 1), the exemption may be granted if you intend to display the aircraft during the following 12 months. Will you display the referenced aircraft at least 12 days during the year following its first date of public display?

- [] YES [] NO

CERTIFICATION

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

SIGNATURE OF CLAIMANT TITLE DATE
EMAIL ADDRESS

THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION



