EF-577-R06-0516-36000428-1 BOE-577 (P1) REV. 06 (05-16)

## AIRCRAFT PROPERTY STATEMENT

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

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COUNTY SAN BERNARDING	13
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1863	

**Josie Gonzales** Assessor-Recorder-County Clerk

County of San Bernardino Assessor's Office 222 W. Hospitality Lane - 4th Floor San Bernardino, CA 92415-0311 www.sbcounty.gov/arc Phone: (909) 387-8307

Toll Free: (877) 885-7654

FILE RETURN BY:	
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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.

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

(Make necessary □	y correc	tions to the prin	ted name a	nd mailing add	lress)	¬	FOR AS	SESSOR'S	USE ONLY	
									А	
SECTION I: MUST BE C	OMD	ETED ANNU	ALLY							
FAA REGISTRATION NUME	_			HONE NUMBE	R AIRCR	AFT LOCATION (AIRPOR	T. HANGAR OR	ΓΙΕ-DOWN	NUMBER)	
N										
MANUFACTURER				MODEL					,	YEAR BUILT
SERIAL NUMBER				PURCHA	SE DATE	PURCHASE PRICE	D	ATE MOVE	D TO THIS CO	DUNTY
						\$				
FOR AIRCRAFT PREVIOUS	SLY RE	GISTERED OR	ASSESSED	O IN ANOTHER	R CALIFORN		OUNTY NAME AN	ID ASSESS	MENT YEAR	S
FIXED BASE OPERATOR N	NAME				LAST MAJOR	R A <mark>IRFRAME</mark> OVÉRH <mark>AU</mark> L	DATE: C	OST:		
AIRCRAFT CONDITION										
WHEN PURCHASED	NEV	GOOL	) A	VERAGE	POOR	DAMAGE HISTORY				
CURRENT	NEV	/ 🔲 GOOI	) 🔲 A'	VERAGE	POOR	☐YES ☐NO IF	YES, SEE INST	RUCTIONS	AND ATTACH	H STATEMENT
INTERIOR	NEV	GOOI	) [ A	VERAGE	POOR	EQUIPMENT LEASE	D, EXCHANGE	D, ADDEI	OR RETIR	ED
EXTERIOR	NEV	/ GOOL	) A	VERAGE [	POOR	YES NO IF	YES, SEE INST	RUC <mark>TIO</mark> NS	S AND ATTACH	H SCHEDULE.
TYPE OF USAGE:  PERSONAL/PLEASURE	- 🗆 -	LICUIT TO AINIIA	IO DENI	TAL CLIA	DTED/TAY!	DUCINITES D FDAG	TIONAL OWNER			IOW/MUSEUM
				_		BUSINESS FRAC CARRIAGE MORE THAN				10W/WIUSEUW
IF YOU CHECKED (						ERRY FLIGHTS OR PART			resNO	
AVIONICS S	UMMA					S. DO NOT REPORT ORI NEW, (A) AVERAGE, (P)		RD FACTOR	RY AVIONICS.	
UNIT		ACQUISITION DATE	COST NEW	CONDITION	ASSESSOR USE ONLY	UNIT	ACQUISITION	COST	CONDITION	ASSESSOR USE ONLY
RVSM REDUCED VERTICAL SEPARATION MINIMU MONITOR	JM					RADAR ALTIMETER				
TAWS TERRAIN AWARENESS WARNING SYSTEM						ENCODER				
EFIS ELECTRONIC FLIGHT INSTRUMENT SYSTE	ΕM					RMI RADIO MAGNETIC INDICATOR				
TCAS TRAFFIC ALERT COLLISION AVOIDANCE SY	YSTEM					VLF VERY LOW FREQUENCY				
NAVCOM #1						PHONE				
NAVCOM #2						RADAR				
TRANSPONDER A C						LORAN				
GLIDESLOPE						ADF AUTOMATIC DIRECTION FINDER				
LOCALIZER						DME DISTANCE MEASURING EQUIPMENT				
COMPASS SYSTEM/HSI HORIZONTAL SITUATION INDICATOR						AIR CONDITIONING				
ALITOPII OT						POOTS				

THE DECLARATION BY ASSESSEE ON PAGE 2 MUST BE COMPLETED AND SIGNED THIS DOCUMENT IS NOT SUBJECT TO PUBLIC INSPECTION

HF TRANSCEIVERS HIGH FREQUENCY OTHER NON-FACTORY

**AVIONICS** 



NUMBER OF AXES FLIGHT DIRECTOR

EF-577-R06-0516-36000428-2

BOE-577 (P2) REV. 06 (05-16))

# PLEASE ENTER INFORMATION AS OF JANUARY 1 OF THIS YEAR.

AIRFRAME HOURS:		7					
ENGINE(S)	SINGLE	LEFT	RIGHT	FOR HEL	ELICOPTERS - HOURS SINCE MAJOR OVERHAUL		
MAKE				ENGINE	MAIN ROTOR	MAIN ROTOR	
MODEL				MAST	BLADES MAST	HEAD ASSEMBLY	
YEAR OF MANUFACTURE				MAST	TRANSMISSION	TAIL ROTOR DRIVESHAFT	
HORSEPOWER				TAIL ROTOR GEARBOX	TAIL ROTOR HUB ASSEMBLY	TAIL ROTOR BLADES	
HOURS SINCE NEW				SERVOS	MISCELLANEOUS	BLADES	
HOURS SINCE MAJOR OVERHAUL				OLIVO0	WIGOLLEANLOGO		
TIME BETWEEN OVERHAULS (TBO)							
HOURS SINCE MIDLIFE							
DATE OF MAJOR OVERHAUL							
DATE OF LANDING GEAR OVERHAUL							
ENGINE MAINTENANCE SERV  IAME OF PROGRAM:  FOR HOMEBUILT, KIT, OR EXP  SECTION II: COMPLETE IF FIR  IAME AND ADDRESS OF OWNER	ERIMENTAL AIRCE	R IF ANY CHA	IGES WITHIN			<del>_</del>	
NAME			DRESS				
CITY				STATE ZIP CODE	COUNTY		
41.1				SIAIL ZII GODE	COUNTY	_	
AIRCRAFT WAS SOLD, ATTACH	A COMPLETE COPY	OF THE SALES (	CONTRACT				
SOLD OR DONATED: DATE OF	SALE		ALE PRICE				
IEW OWNER NAME		\$ AD	DRESS				
	7/-	4/1					
CITY		I/V	/	STATE ZIP CODE	COUNTY		
F: MOVED JUNKED	PARTED DEST	ROYED ABA	NDONED				
DATE NEW LOCATION	ON (IF MOVED)				COUNTY		
TVDI ANIATION			$\Lambda$				
EXPLANATION	, , , ,			\/(			
AIRCRAFT NOT HABITUALLY BAS				V			
IRPORT/FBO WHERE NORMALLY	KEPT				HANGAR/TIE-DOV	VN NO.	
CITY				STATE ZIP CODE	COUNTY		
					333		
CHECK REASON AIRCRAFT IS OR	WAS IN THIS COUNT	TY: REPAI <mark>RS</mark>	FOR SALE	IN TRANSIT TO:			
				OTHER:			
ATTACH STATEMENT R				OU FEEL WOULD A CH A LIST OF MEM		YOUR AIRCRAFT.	
OWNERSHIP TYPE (☑)	II OWNERSHIP	TIFE IS LLC, F		TION BY ASSES			
Proprietorship No. Partnership I certificate Statem is true Other Control	y (or declare) under nent, including accor nert, correct, and com lled, or managed by	er penalty of pery mpanying schedu oplete and includ	st be complete jury under the ules, statements des all proper	ed and signed. If y laws of the State of s or other attachment ty required to be	ou do not do so, it may of California that I have nts, and to the best of my reported which is owne nt at 12:01 a.m. on Janua DATE	examined this prope y knowledge and belie ed, claimed, possesse	
SIGNATURE OF ASSESSEE OR AUTHOR					· <del>-</del>		
SIGNATURE OF ASSESSEE OR AUTHOR							
•	AGENT* (typed or printed	)			TITLE		
SIGNATURE OF ASSESSEE OR AUTHOR NAME OF ASSESSEE OR AUTHORIZED		)					
•		)			FEDERAL EMPLOYER ID NUM	MBER	
NAME OF ASSESSEE OR AUTHORIZED	A) (typed or printed)	)	TELEPHOI	NE NUMBER		иBER	

\*AGENT: SEE INSTRUCTIONS FOR DECLARATION BY ASSESSEE. THIS STATEMENT IS SUBJECT TO AUDIT



## **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, 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 LLC 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.



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