EF-577-R07-0518-42000066-1 BOE-577 (P1) REV. 07 (05-18)

AIRCRAFT PROPERTY STATEMENT



Joseph E. Holland County Clerk, Recorder and Assessor

P.O. Box 159 Santa Barbara, CA 93102-0159 Santa Barbara: (805) 568-7899 Santa Maria: (805) 346-8310

AINONAI I I NOI ENTI STATEMENT
Declaration of costs and other related property information as of 12:01 a.m., January 1, 20
FILE RETURN BY:

PLEASE NOTE: This for Assessor's office, regard Aircraft Exemption Claim	less of the st	atus of a	ny Historic	al						
NAME AND MAILING (Make necessary con	٦		FOR ASSESSOR'S USE ONLY							
L					ل					
SECTION I: MUST BE COMP	LETED ANNU	ALLY							Λ	
1. FAA REGISTRATION NUMBER N] 9	DAYTIME PH	ONE NUMBE	R AIRCR	AFT LOC	ATION (AIRPOR	, HANGAR OR	TIE-DOWN	NUMBER)	
MANUFACTURER			MODEL)	YEAR BUILT
SERIAL NUMBER			PURCHA	SE DATE	PURCH \$	IASE PRICE	D.	ATE MOVE	D TO THIS CO	OUNTY
FOR AIRCRAFT PREVIOUSLY RE	EGISTERED OR	ASSESSED	IN ANOTHER	R CALIFORNI	A COUN	TY, INDICATE CO	UNTY NAME AN	ND ASSESS	SMENT YEAR:	S
FIXED BASE OPERATOR NAME				LAST MAJOF	RAI <mark>RF</mark> RA	ME OVERHAUL	DATE: C	OST:		
2. AIRCRAFT CONDITION:									_	
WHEN PURCHASED NE	W GOOI	D A'	VERAGE [POOR	DAMAG	GE HISTORY				
CURRENT NE	W GOOI	D	VERAGE [POOR		YES NO IF	YES, SEE INST	RUCTIONS	S AND ATTACH	H STATEMENT
NTERIOR NE	W GOOI		VERAGE	POOR	EQUIP	ME <mark>NT</mark> LEASE	, EXCHANGE	D, ADDEI	OR RETIR	ED
EXTERIOR NE	W GOOI	A C	VERAGE	POOR		YES NO IF	YES, SEE INST	RUC <mark>TIO</mark> NS	S AND ATTACH	H SCHEDULE.
3. TYPE OF USAGE:										
PERSONAL/PLEASURE I	LIGHT TRAININ	IG REN	TAL CHA	RTER/TAX	BUSI	NESS T FRAC	TIONAL OWNE	RSHIP PRO	OGRAM SH	HOW/MUSEUN
IF YOU CHECKED CHAR						GE MORE THAN			YES NO	
4. AVIONICS SUMM	ARY: REPORT C	NLY ADDEI	O OR REPLAC	ED AVIONIC	S. DO NO		SINAL STANDAR		RY AVIONICS.	
UNIT	ACQUISITION DATE	COST NEW	CONDITION	ASSESSOR USE ONLY		UNIT	ACQUISITION DATE	COST NEW	CONDITION	ASSESSOR USE ONLY
RVSM REDUCED VERTICAL SEPARATION MINIMUM MONITOR					RADAR	ALTIMETER				
TAWS TERRAIN AWARENESS WARNING SYSTEM					ENCODE	R				
EFIS ELECTRONIC FLIGHT INSTRUMENT SYSTEM					RMI RADIO MAG	NETIC INDICATOR				
TCAS TRAFFIC ALERT COLLISION AVOIDANCE SYSTEM					VLF VERY LOW F	FREQUENCY				
NAVCOM #1					PHONE					
NAVCOM #2					RADAR					
TRANSPONDER A C					LORAN					
GLIDESLOPE					ADF AUTOMATIC	DIRECTION FINDER				
LOCALIZER						TEASURING EQUIPMENT				
COMPASS SYSTEM/HSI HORIZONTAL SITUATION INDICATOR AUTOPILOT					AIR CON	IDITIONING				
NUMBER OF AXIS										
FLIGHT DIRECTOR GPS IFR					HIGH FREQU	NSCEIVERS JENCY NON-FACTORY				
GLOBAL POSITIONING SYSTEM, INSTRUMENT FLIGHT RULES	THE DECL 45				AVIONIC			<u></u>		



BOE-577 (P2) REV. 07 (05-18) **SECTION I: (continued)**

PLEASE ENTER INFORMATION AS OF JANUARY 1 OF THIS YEAR.

5.	ENGINE(S)	SINGLE	LEFT	RIGHT	6. TOTAL AIRFRAME HOURS:							
	MAKE				6. IOIAL	AIRFRAIME HOU	NJ.					
	MODEL											
	YEAR OF MANUFACTURE				EOD HELL	IELICOPTERS - HOURS SINCE MAJOR OVERHAUL:						
	HORSEPOWER				ENGINE	MAIN ROTOR	MAIN ROTOR					
	HOURS SINCE NEW				LIVOINE	BLADES	HEAD ASSEMBLY					
	HOURS SINCE MAJOR OVERHAUL				MAST	MAST TRANSMISSION	TAIL ROTOR DRIVESHAFT					
	HOURS SINCE MIDLIFE				TAIL ROTOR GEARBOX	TAIL ROTOR HUB ASSEMBLY	TAIL ROTOR BLADES					
					SERVOS	MISCELLANEOUS	BLADES					
	DATE OF MAJOR OVERHAUL DATE OF LANDING GEAR OVERHAUL				SERVOS	MIGGELEANEOGO						
	GINE MAINTENANCE SERVICE ME OF PROGRAM:	= PROGRAM:	YES NO		ENROLLMENT I	DATE:						
FO	R HOMEBUILT, KIT, OR EXPER	IMENTAL AIRCRA	AFT, ENTER EXA	CT DATE OF FIR	ST FLIGHT:							
	CTION II: COMPLETE IF F <mark>IR</mark> ST				LAST CALENDA	AR YEAR						
NA NA	ME AND ADDRESS OF OWNER IF I	DIFFERENT FROM	AA REGISTERED									
14/ (IVIL		ABBIN									
CIT	Y			STATE	ZIP CODE	COUNTY						
_												
IF A	IRCRAFT WAS SOLD, ATTACH A C	OMPLETE COPY O	F THE SALES CON	ITRACT								
IF S	SOLD OR DONATED: DATE OF SA	ALE		PRICE								
NF	W OWNER NAME	_	\$ ADDR	RESS								
			,,,,,,									
CIT	Υ			STATE	ZIP CODE	COUNTY						
IF:	MOVED JUNKED PA	RTED DESTRO	DYED ABAND	ONED								
DA	TE NEW LOCATION	(IF MOVED)				COUNTY						
<u></u>	DI ANIATIONI											
ΕXI	PLANATION											
AIR	CRAFT NOT HABITUALLY BASED	IN THIS COUNTY										
AIR	PORT/FBO WHERE NORMALLY KE	PT				HANGAR/TIE-DOWN	NO.					
CIT	Y			STATE	ZIP CODE	COUNTY						
CH	ECK REASON AIRCRAFT IS OR WA	S IN THIS COUNTY	REPAIRS	EOR SALE	N TRANSIT TO:							
0												
	ATTA OLI OTATEMENT DEO	ADDING AND A	NITIONIA INTO E		THER:	NOT HO IN MALLINO M						
	ATTACH STATEMENT REG	ARDING ANY ADI IF OWNERSHIP T					OUR AIRCRAFT.					
O'	WNERSHIP TYPE (☑)		1	DECLARATION	BY ASSESSE	Ε						
Pr	oprietorship	: The following d	eclaration must	be completed an	d signed. If you	do not do so, it may r	esult in penalties.					
	Partnership Corporation I certify (or declare) under penalty of perjury under the laws of the State of California that I have examined this property											
	statement, including accompanying schedules, statements or other attachments, and to the best of my knowledge and belief it											
_	ther is true, co					hich is owned, claimed,						
SIG	NATURE OF ASSESSEE OR AUTHORIZE		e person named	as the assessee i		at 12:01 a.m. on Januar	y 1, 20					
SIGNATURE OF ASSESSEE OR AUTHORIZED AGENT*						DATE						
NAME OF ASSESSEE OR AUTHORIZED AGENT* (typed or printed)					TI	TITLE						
NA	ME OF LEGAL ENTITY (other than DBA) (t	yped or printed)			FE	FEDERAL EMPLOYER ID NUMBER						
PR	EPARER'S NAME AND ADDRESS (typed o	or printed)		TELEPHONE NUM	MBER TI	ΓLE						
E-N	MAIL ADDRESS											

THIS STATEMENT IS SUBJECT TO AUDIT

*AGENT: SEE INSTRUCTIONS FOR DECLARATION
BY ASSESSEE.

EFT7.007.0618.49000066

FFT7.007.0618.49000066

**THIS STATEMENT OF THE STATEME



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 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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