EF-577-R07-0518-44000179-1 BOE-577 (P1) REV. 07 (05-18)

### **AIRCRAFT PROPERTY STATEMENT**

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

FILE RETURN BY: \_\_\_\_\_



# **Sheri Thomas County of Santa Cruz Assessor**

701 Ocean Street, Rm. 130 Santa Cruz, CA 95060 Phone: 831-454-2002

Email: asrwebmail@co.santa-cruz.ca.us

PLEASE NOTE: This for Assessor's office, regard Aircraft Exemption Claim	less of the st	atus of a	any Histori	cal						
NAME AND MAILING (Make necessary corr □		inted name	and mailing a	ddress)	٦		FOR AS	SESSOR'S	SUSE ONLY	
SECTION I: MUST BE COMP	LETED ANNU	ALLY			١				Λ	
1. FAA REGISTRATION NUMBER	1	DAYTIME P	HONE NUMB	ER AIRCR	AFT LOC	ATION (AIRPOR	T, HANGAR OR	ΓΙΕ-DOWN	NUMBER)	
MANUFACTURER			MODEL						,	YEAR BUILT
SERIAL NUMBER			PURCH	ASE DATE	PURCH	ASE PRICE	Di	ATE MOVE	D TO THIS CO	DUNTY
FOR AIRCRAFT PREVIOUSLY RE	GISTERED OR	ASSESSE	D IN ANOTHE	R CALIFORN	IA COUNT	Y, INDICATE CO	UNTY NAME AN	ID ASSESS	MENT YEARS	S
FIXED BASE OPERATOR NAME				LAST MAJO	RAIRFRA	ME OVERHAUL	DATE: C	OST:		
2. AIRCRAFT CONDITION:										
WHEN PURCHASED NE	W GOO	D 🗌	AVERAGE	POOR	DAMAGE HISTORY					
CURRENT NE	W G00	D $\square$ A	AVERAGE	POOR	YES NO IF YES, SEE INSTRUCTIONS AND ATTACH STATEMEN					H STATEMENT
INTERIOR NE	W GOO		AVERAGE	POOR	EQUIPMENT LEASED, EXCHANGED, ADDED OR RETIRED				ED	
EXTERIOR NE	W GOO		VERAGE	POOR	YES NO IF YES, SEE INSTRUC <mark>TIONS AND ATTACH SCHEDU</mark>				H SCHEDULE.	
IF YOU CHECKED CHAR	NOTE: COMMO ARY: REPORT C	OU USE TO N CARRIAD ONLY ADDE	HE AIRCRAFT GE DOES NO D OR REPLA	T INCLUDE F	CARRIAGERRY FLICES. DO NO	GHTS OR PART T REPORT ORI	50% OF THE TI 91 OWNER FLIG GINAL STANDAF	ME? \\	YES NO	HOW/MUSEUN
UNIT	ACQUISITION DATE	COST	CONDITION	ASSESSOR	) NEW, (A	UNIT	ACQUISITION	COST	CONDITION	ASSESSOR USE ONLY
RVSM REDUCED VERTICAL SEPARATION MINIMUM	DATE	NEW		OUL OILL	RADAR A	LTIMETER	DATE	NEW		OUL ONE!
MONITOR  TAWS TERRAIN AWARENESS WARNING SYSTEM					ENCODE	R				
EFIS ELECTRONIC FLIGHT INSTRUMENT SYSTEM					RMI RADIO MAGN	IETIC INDICATOR				
TCAS TRAFFIC ALERT COLLISION AVOIDANCE SYSTEM					VLF VERY LOW F					
NAVCOM #1					PHONE					
NAVCOM #2					RADAR					
TRANSPONDER A C					LORAN					
GLIDESLOPE					ADF AUTOMATIC	DIRECTION FINDER				
LOCALIZER					DME DISTANCE MI	EASURING EQUIPMENT				
COMPASS SYSTEM/HSI HORIZONTAL SITUATION INDICATOR						DITIONING				
AUTOPILOT  NUMBER OF AXIS					BOOTS					
FLIGHT DIRECTOR					HF TRAN	ISCEIVERS ENCY				
GPS IFR GLOBAL POSITIONING SYSTEM, INSTRUMENT FLIGHT RULES					AVIONIC	NON-FACTORY S				

THE DECLARATION BY ASSESSEE ON PAGE 2 MUST BE COMPLETED AND SIGNED



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. TOTA	6. TOTAL AIRFRAME HOURS:				
	MAKE				5. TO 17.					
	MODEL									
	YEAR OF MANUFACTURE				FOR HEL	R HELICOPTERS - HOURS SINCE MAJOR OVERI				
	HORSEPOWER HOURS SINCE NEW				ENGINE	MAIN ROTOR BLADES	MAIN ROTOR HEAD ASSEMBLY			
	HOURS SINCE MAJOR OVERHAUL				MAST	MAST	TAIL ROTOR			
	TIME BETWEEN OVERHAULS (TBO)					TRANSMISSION	DRIVESHAFT			
	HOURS SINCE MIDLIFE				TAIL ROTOR GEARBOX	TAIL ROTOR HUB ASSEMBLY	TAIL ROTOR BLADES			
	DATE OF MAJOR OVERHAUL				SERVOS	MISCELLANEOUS				
	DATE OF LANDING GEAR OVERHAUL									
	GINE MAINTENANCE SERVICE ME OF PROGRAM:	PROGRAM:	YES NO		ENROLLMENT	DATE:				
FO	R HOMEBUILT, KIT, OR EXPER	IMENTAL AIRCRA	AFT, ENTER EXAC	T DATE OF FIR	ST FLIGHT:		_			
SE	CTION II: COMPLETE IF FIRST	TIME FILING OF	IF ANY CHANGE	S WITHIN THE	LAST CALEND	AR YEAR				
_	ME AND ADDRESS OF OWNER IF I	DIFFERENT FROM				_				
NA	ME		ADDRE	:55			4			
CIT	Y			STATE	ZIP CODE	COUNTY				
IF A	IRCRAFT WAS SOLD, ATTACH A C	OMPLETE COPY C	F THE SALES CON	TRACT						
IF S	SOLD OR DONATED: DATE OF SA	ALE	SALE F	PRICE						
NE	W OWNER NAME		\$ ADDRE	SS						
CIT	Y		IV	STATE	ZIP CODE	COUNTY				
IF:	MOVED JUNKED PA	RTED DESTR	OYED ABANDO	ONED		•				
DA <sup>-</sup>						COUNTY				
EXI	PLANATION									
AIR	CRAFT NOT HABITUALLY BA <mark>SE</mark> D	IN THIS COUNTY								
AIR	PORT/FBO WHERE NORMAL <mark>LY KE</mark>	PT				HANGAR/TIE-DOWN	NO.			
CIT	Υ			STATE	ZIP CODE	COUNTY				
CH	ECK REASON AIRCRAFT IS OR WA	S IN THIS COUNTY	REPAIRS F	OR SALE	N TRANSIT TO:					
					OTHER:					
_	ATTACH STATEMENT REG	APDING ANV AD	DITIONAL INFORM			SIST HS IN VALUING V				
			YPE IS LLC, PLE				JUN AIRCRAI I.			
0'	WNERSHIP TYPE (☑)		D	ECLARATION	BY ASSESS	EE				
Pr	oprietorship	: The following d	eclaration must b	e completed an	d signed. If yo	u do not do so, it may r	esult in penalties.			
Pa	artnership / certify //	or declare) under	nepalty of perium	under the laws	of the State of	California that I have e	vamined this property			
	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									
_	is true, co					which is owned, claimed,				
SIG	NATURE OF ASSESSEE OR AUTHORIZE	• .	ne person named a	is the assessee i		t at 12:01 a.m. on Januar PATE	y 1, 20 <u> </u> .			
		DAGENT								
NA	ME OF ASSESSEE OR AUTHORIZED AGE	ENT* (typed or printed)			Т	ITLE				
NA	ME OF LEGAL ENTITY (other than DBA) (t	yped or printed)			F	EDERAL EMPLOYER ID NUMBE	ER			
PR	EPARER'S NAME AND ADDRESS (typed o	or printed)		TELEPHONE NUI	MBER T	ITLE				
F-N	MAIL ADDRESS									
- "										

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, 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.



EF-577-R07-0518-44000179