EF-576-E-R09-0521-45000101-1

BOE-576-E (P1) REV. 09 (05-21)

## 20 \_\_\_ AFFIDAVIT FOR 4 PERCENT ASSESSMENT OF CERTAIN VESSELS



ASSESSOR-RECORDER 1450 Court St., Suite 208A Redding, CA 96001-1667

**LESLIE MORGAN** 

Tel: (530) 225-3640 Intra\_County toll free: 1(800)479-8009

To receive the full benefit of the reduced assessment, file this affidavit with the Assessor by **February 15**. If the affidavit is filed between February 16 and August 1, 80% of the reduced assessment is available.

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

|                                                                                                                                                                                                                                                                                                                                                                                     | L                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                   | _                                                        |                           |                              |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------|----------------------------------------------------------|---------------------------|------------------------------|--|
| NAME OF A                                                                                                                                                                                                                                                                                                                                                                           | PPLICANT (LAST, FIRST, MIDDLE INITIAL                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | .)                                |                                                          | ASSESSOR'S PARCEL/ASSES   | SSMENT NUMBER                |  |
| CORPORAT                                                                                                                                                                                                                                                                                                                                                                            | TION, PARTNERSHIP, DBA                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                   |                                                          |                           | Λ                            |  |
| ADDRESS                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                   | CITY                                                     |                           | STATE ZIP                    |  |
| Check and complete the following, as applicable:                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                   |                                                          |                           |                              |  |
| 1<br>2                                                                                                                                                                                                                                                                                                                                                                              | The applicant or organization is the owner of a vessel that is documented by the United States Coast Guard.  Vessel name:  Documented Vessel Number  OR  The applicant or organization is the owner of a vessel that is registered by the California Department of Motor Vehicles.                                                                                                                                                                                                                                                                                                                                                                       |                                   |                                                          |                           |                              |  |
| 2.                                                                                                                                                                                                                                                                                                                                                                                  | CF number:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | is the owner of a vesser th       |                                                          | anomia Bepartment of Mo   | tor vernoes.                 |  |
| The vess                                                                                                                                                                                                                                                                                                                                                                            | sel is engaged or empl <mark>oy</mark> ed <u>ex</u> o                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | <u>clusively</u> in one or more o | f the foll <mark>owing</mark> activi <mark>tie</mark> s: |                           |                              |  |
| 3. Taking and possession of fish or other living resource of the sea for commercial purposes.                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                   |                                                          |                           |                              |  |
| 4. Instruction or research studies as an oceanographic research vessel. Attach evidence of official classification by United States Department of Homeland Security or Coast Guard, and attach a contract, statement, or agreement from a recognized college, university government agency, private foundation, or organization outlining the nature of research and time duration. |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                   |                                                          |                           |                              |  |
| 5.                                                                                                                                                                                                                                                                                                                                                                                  | Carrying or transporting seven or more people for hire for commercial passenger fishing purposes, and holds a current certificate of inspection issued by the United States Coast Guard (attach a copy). A vessel shall not be deemed to be engaged or employed in activities other than the carrying or transporting of seven or more persons for hire for commercial passenger fishing purposes by reason of that vessel being used occasionally for dive, tour, or whale-watching purposes. For purposes of this subdivision, occasionally means 15 percent or less of the total operating time logged for the immediately preceding assessment year. |                                   |                                                          |                           |                              |  |
| 6.                                                                                                                                                                                                                                                                                                                                                                                  | Was the vessel used for any of of days used in this activity.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | ther activity during the pred     | ceding calendar year?                                    | Yes No If Yes, desci      | ribe the activity and number |  |
| If items 3                                                                                                                                                                                                                                                                                                                                                                          | 3 or 5 are checked, provide the                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | Fish & Game Boat Number           | er:                                                      |                           |                              |  |
|                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | CE                                | RTIFICATION                                              |                           |                              |  |
| 10                                                                                                                                                                                                                                                                                                                                                                                  | certify (or declare) under penal<br>including any accompanying s                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                   |                                                          |                           |                              |  |
| SIGNATURE OF APPLICANT                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                   | TITLE                                                    |                           | DATE                         |  |
|                                                                                                                                                                                                                                                                                                                                                                                     | Whom should                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | d we contact during no            | mal business hours fo                                    | or additional information | on?                          |  |
| NAME                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                   |                                                          |                           |                              |  |
| E-MAIL ADD                                                                                                                                                                                                                                                                                                                                                                          | PRESS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                   |                                                          | D                         | AYTIME TELEPHONE             |  |

THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION



BOE-576-E (P2) REV. 09 (05-21)

## **GENERAL INFORMATION**

Revenue and Taxation Code section 227 states: "A documented vessel, as defined in Section 130, shall be assessed at 4 percent of its full cash value only if the vessel is engaged or employed exclusively in any of the following:

- (a) In the taking and possession of fish or other living resource of the sea for commercial purposes.
- (b) In instruction or research studies as an oceanographic research vessel.
- (c) In carrying or transporting seven or more people for hire for commercial passenger fishing purposes and holds a current certificate of inspection issued by the United States Coast Guard.

A vessel shall not be deemed to be engaged or employed in activities other than the carrying or transporting of seven or more persons for hire for commercial passenger fishing purposes by reason of that vessel being used occasionally for dive, tour, or whale watching purposes. For purposes of this subdivision, 'occasionally' means 15 percent or less of the total operating time logged for the immediately preceding assessment year."

Revenue and Taxation Code section 275.5 states: "If a person claiming classification of a vessel as a documented vessel eligible for assessment under Section 227 fails to file the affidavit required by Section 254 by 5 p.m. on February 15 of the calendar year in which the fiscal year begins, but files that affidavit on or before the following August 1, the assessment shall be reduced in a sum equal to 80 percent of the reduction that would have been allowed had the affidavit been timely filed."



