## AIRCRAFT PROPERTY STATEMENT

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



FILE RETURN BY:

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.

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SECTION I: MUST BE C	OMPL									<b>A</b>	
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FIXED BASE OPERATOR N	IAME				LASTMAJO	RAIRFRAI	ME OVERHAUL I	DATE: CO	OST:		
2. AIRCRAFT CONDITIC								· · · · · · · · · · · · · · · · · · ·		_	
WHEN PURCHASED	NEW			WERAGE	POOR	-					
CURRENT	NEW	GOC		VERAGE	POOR		YES NO IF				
INTERIOR	NEW	GOC		AVERAGE	POOR		MENT LEASED				
EXTERIOR	NEW	GOC	D 🔽 /	VERAGE	_ POOR		YES NO IF	YES, SEE INST	RUC <mark>TIO</mark> N	S AND ATTACI	H SCHEDULE.
3. TYPE OF USAGE:											
PERSONAL/PLEASURE	FL	IGHT TRAINI			RTER/TAX				RSHIP PRO	OGRAM SH	HOW/MUSEUM
IF YOU CHECKED (	CHART	ER/TAXI, DO	YOU USE T	HE AIRCRAFT			SE MORE THAN	50% OF THE TI	M <mark>E?</mark>	YES NO	
							GHTS OR PART				
4. AVIONICS S	UMMAF	RY: REPORT					T REPORT ORIG AVERAGE, (P) F		RD FACTO	RY AVIONICS.	
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TCAS						VLF					
TRAFFIC ALERT COLLISION AVOIDANCE SY	STEM					VERY LOW FF	REQUENCY				
NAVCOM #1						PHONE					
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NUMBER OF AXIS											
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GLOBAL POSITIONING SYSTEM, INSTRUME FLIGHT RULES	ENT					AVIONICS					
				V ADDEDDE							

THE DECLARATION BY ASSESSEE ON PAGE 2 MUST BE COMPLETED AND SIGNED THIS DOCUMENT IS NOT SUBJECT TO PUBLIC INSPECTION EF-577-R07-0518-56000063-2 BOE-577 (P2) REV. 07 (05-18) SECTION I: (continued)

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

HOURS SINCE NEW     BLADES     HEAD ASSE       HOURS SINCE MAJOR OVERHAUL     MAST     MAST     TAIL ROTOR		ENGINE(S)	SINGLE	LEFT	RIGHT			
YPAR OF MANUFACTURE       FOR HELICOPTERS - HOURS SINCE MAJOR OVER         HOURS SERVER NOW       MAIN FORM         HOURS SERVER NOW       MAIN FORM         HOURS SERVER NOW       MAIN FORM         HOURS SERVER NAME       MAIN FORM         HOURS SERVER MAJOR OVERHALL       MAIN FORM         DATE OF LUBORG GEAR OVERHALL       MAIN FORM         SCHOR DATE OF ANY OF PROVED       MAIN FORM         SCHOR DATE OF OWER FILL       MAIN FORM         SCHOR DATE OF OWER FILL       MAIN FORM         SCHOR DONATED       DATE OF LUBORG MAIN         STY       STATE ZIP CODE       COUNTY         FILL MOVED       DATE OF LUBORG MAIN FORM       STATE ZIP CODE       COUNTY         FIL MOVED       DATE OF LUBORG MAIN FORM       ADDRESS<	E.	MAKE				6. IOIAL	AIRFRAME HOU	R5:
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HORSENDUER       Image Since MADR OVERHAUL       Image Since MADR OVERHAULS (TRO)       Image Since MADR OVERHAUS (TRO)       Image Since MADR OVE		YEAR OF MANUFACTURE				-		
HORES SINCE NEW       ILADES       HEAD STATE       HEAD STATE         HORES SINCE MORENALL       ILADES       HEAD STATE       MAT       TRANSABSION       PREADES         HORES SINCE MOLTE       ILADES       HEAD STATE       MAT       TRANSABSION       PREADES         DATE OF LANDOR OVERHALL       ILADES       HEAD STATE       MAT       TRANSABSION       PREADES         DATE OF LANDOR OVERHALL       ILADES       HEAD STATE       SERVOS       MISCILLAREOUS       ILADES         DATE OF LANDOR OVERHALL       ILADES       HEAD STATE       SERVOS       MISCILLAREOUS       ILADES         ONH FORMARCE SERVICE PROGRAM:       YES       NO       SERVOS       MISCILLAREOUS       ILADES         SIGNE MAINTENANCE SERVICE PROGRAM:       YES       NO       ENROLLET IF FIRST TIME FLING OF IAN CHARGES WITHIN THE LAST CALENDAR YEAR         AME       ADDRESS       GOUNTY       STATE ZIP CODE       COUNTY         STATE       IDATE DE PROGRAM:       STATE ZIP CODE       COUNTY         STATE       IDATE DE PROGRAM:       STATE       ZIP CODE       COUNTY         STATE       IDATE DE ALE STATE ZIP CODE       COUNTY       STATE       COUNTY         STATE       IDATE DE ALE STATE       ZIP CODE       COUNTY <td< td=""><td>ŀ</td><td>HORSEPOWER</td><td></td><td></td><td></td><td></td><td></td><td></td></td<>	ŀ	HORSEPOWER						
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Submit       State       ZIP       COUNTY         F:       MOVED       JUNKED       PARTED       DESTROYED       ABANDONED         DATE       NEW LOCATION (IF MOVED)       COUNTY         DATE       NEW LOCATION (IF MOVED)       COUNTY         SXPLANATION       COUNTY       COUNTY         URCRAFT NOT HABITUALLY BASED IN THIS COUNTY       HANGAR/TE-DOWN NO.         STTY       STATE       ZIP CODE         COUNTY       STATE       COUNTY         URPORT/FBO WHERE NORMALLY KEPT       HANGAR/TE-DOWN NO.         STTY       STATE       ZIP CODE         COUNTY       OTHER:       COUNTY         CHECK REASON AIRCRAFT IS OR WAS IN THIS COUNTY!       REPAIRES       FOR SALE         IF OWNERSHIP TYPE (20)       DECLARATION BY ASSESSE       NAMES.         OWNERSHIP TYPE (21)       DECLARATION BY ASSESSEE       Note: The following declaration must be completed and signed. If you do not do so, it								
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EXPLANATION         AIRCRAFT NOT HABITUALLY BASED IN THIS COUNTY         NIRPORT/FBO WHERE NORMALLY KEPT         HANGARTIE-DOWN NO.         CITY       STATE ZIP CODE         COUNTY         CHECK REASON AIRCRAFT IS OR WAS IN THIS COUNTY       REPAIRS         FOR SALE       IN TRANSIT TO:         OTHER:       OTHER:         ATTACH STATEMENT REGARDING ANY ADDITIONAL INFORMATION YOU FEEL WOULD ASSIST US IN VALUING YOUR AIRCRAFT IF OWNERSHIP TYPE IS LLC, PLEASE ATTACH A LIST OF MEMBERS NAMES.         OWNERSHIP TYPE (IZ)       DECLARATION BY ASSESSEE         Proprietorship       I certify (or declare) under penalty of perjury under the laws of the State of California that I have examined this property required be reported which is owned, claimed, possessed, con or managed by the person named as the assesse in this statement at 12:01 a.m. on January 1, 20	F: [			YED ABAND	ONED			
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NIRPORT/FBO WHERE NORMALLY KEPT       HANGARTIE-DOWN NO.         CITY       STATE       ZIP CODE       COUNTY         CHECK REASON AIRCRAFT IS OR WAS IN THIS COUNTY:       REPAIRS       FOR SALE       IN TRANSIT TO:         CHECK REASON AIRCRAFT IS OR WAS IN THIS COUNTY:       REPAIRS       FOR SALE       IN TRANSIT TO:         CHECK REASON AIRCRAFT IS OR WAS IN THIS COUNTY:       REPAIRS       FOR SALE       IN TRANSIT TO:         CHECK REASON AIRCRAFT IS OR WAS IN THIS COUNTY:       REPAIRS       FOR SALE       IN TRANSIT TO:         CHECK REASON AIRCRAFT IS OR WAS IN THIS COUNTY:       REPAIRS       FOR SALE       IN TRANSIT TO:         CHECK REASON AIRCRAFT IS OR WAS IN THIS COUNTY:       REPAIRS       FOR SALE       IN TRANSIT TO:         CHECK REASON AIRCRAFT       COUNTY       OTHER:       ATTACH STATEMENT REGARDING ANY ADDITIONAL INFORMATION YOU FEEL WOULD ASSIST US IN VALUING YOUR AIRCRAFT         OWNERSHIP TYPE (20)       DECLARATION BY ASSESSEE       Note: The following declaration must be completed and signed. If you do not do so, it may result in penal         Partnership       I       I certify (or declare) under penalty of perjury under the laws of the State of California that I have examined this person named as the assessee in this statements, and to the best of my knowledge and is true, correct, and complete and includes all property required to be reported which is owned, claimed, possessed, cou or managed by the person named as the assessee in this s	AIRC	RAFT NOT HABITUALLY BASE						
CHECK REASON AIRCRAFT IS OR WAS IN THIS COUNTY:       REPAIRS       FOR SALE       IN TRANSIT TO:         OTHER:       OTHER:         ATTACH STATEMENT REGARDING ANY ADDITIONAL INFORMATION YOU FEEL WOULD ASSIST US IN VALUING YOUR AIRCRAFTIF OWNERSHIP TYPE IS LLC, PLEASE ATTACH ALIST OF MEMBERS NAMES.         OWNERSHIP TYPE (ID)       DECLARATION BY ASSESSEE         Note: The following declaration must be completed and signed. If you do not do so, it may result in penal         Proprietorship       I certify (or declare) under penalty of perjury under the laws of the State of California that I have examined this penal         Other       I certify (or declare) under penalty of perjury under the laws of the State of California that I have examined this penal         Other       I certify (or declare) under penalty of perjury under the laws of the State of California that I have examined this penal         Other       I certify (or declare) under penalty of perjury under the laws of the State of California that I have examined this penal         SIGNATURE OF ASSESSEE OR AUTHORIZED AGENT*       DATE         NAME OF ASSESSEE OR AUTHORIZED AGENT*       DATE         NAME OF LEGAL ENTITY (other than DBA) (typed or printed)       TELEPHONE NUMBER         PREPARER'S NAME AND ADDRESS (typed or printed)       TELEPHONE NUMBER							HANGAR/TIE-DOWN	NO.
CHECK REASON AIRCRAFT IS OR WAS IN THIS COUNTY: REPAIRS FOR SALE OTHER:  ATTACH STATEMENT REGARDING ANY ADDITIONAL INFORMATION YOU FEEL WOULD ASSIST US IN VALUING YOUR AIRCRAF IF OWNERSHIP TYPE IS LC, PLEASE ATTACH ALIST OF MEMBERS NAMES.  OWNERSHIP TYPE (I) Proprietorship Partnership Corporation Other I certify (or declare) under penalty of perjury under the laws of the State of California that I have examined this performance of the assesses of the statement, including accompanying schedules, statements or other attachments, and to the best of my knowledge and is true, correct, and complete and includes all property required to be reported which is owned, possessed, corr or managed by the person named as the assesse in this statement at 12:01 a.m. on January 1, 20								
ATTACH STATEMENT REGARDING ANY ADDITIONAL INFORMATION YOU FEEL WOULD ASSIST US IN VALUING YOUR AIRCRAF IF OWNERSHIP TYPE (I) Proprietorship   Partnership   Corporation   Other     Certify (or declare) under penalty of perjury under the laws of the State of California that I have examined this p statement, including accompanying schedules, statements or other attachments, and to the best of my knowledge and is true, correct, and complete and includes all property required to be reported which is owned, claimed, possessed, con or managed by the person named as the assessee in this statement at 12:01 a.m. on January 1, 20	CITY				STAT	E ZIP CODE	COUNTY	
ATTACH STATEMENT REGARDING ANY ADDITIONAL INFORMATION YOU FEEL WOULD ASSIST US IN VALUING YOUR AIRCRAF IF OWNERSHIP TYPE IS LLC, PLEASE ATTACH ALIST OF MEMBERS NAMES.           OWNERSHIP TYPE [2]         DECLARATION BY ASSESSEE           Proprietorship         I           Partnership         I certify (or declare) under penalty of perjury under the laws of the State of California that I have examined this person named as the assessee in this statement, including accompanying schedules, statements or other attachments, and to the best of my knowledge and is true, correct, and complete and includes all property required to be reported which is owned, claimed, possessed, con or managed by the person named as the assessee in this statement at 12:01 a.m. on January 1, 20								
ATTACH STATEMENT REGARDING ANY ADDITIONAL INFORMATION YOU FEEL WOULD ASSIST US IN VALUING YOUR AIRCRAF IF OWNERSHIP TYPE IS LLC, PLEASE ATTACH A LIST OF MEMBERS NAMES. OWNERSHIP TYPE (      OWNERSHIP TYPE (    DECLARATION BY ASSESSEE Note: The following declaration must be completed and signed. If you do not do so, it may result in penal Partnership Corporation Other    I certify (or declare) under penalty of perjury under the laws of the State of California that I have examined this period statement, including accompanying schedules, statements or other attachments, and to the best of my knowledge and is true, correct, and complete and includes all property required to be reported which is owned, claimed, possessed, con or managed by the person named as the assessee in this statement at 12:01 a.m. on January 1, 20      NAME OF ASSESSEE OR AUTHORIZED AGENT*    DATE      NAME OF LEGAL ENTITY (other than DBA) (typed or printed)    TILE      PREPARER'S NAME AND ADDRESS (typed or printed)    TELEPHONE NUMBER (    TITLE	CHEC	CK REASON AIRCRAFT IS OR W.	AS IN THIS COUNTY:	REPAIRS	FOR SALE	IN TRANSIT TO:		
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OWNERSHIP TYPE (☑)       DECLARATION BY ASSESSEE         Proprietorship       □         Partnership       □         Corporation       □         Other       □         I       certify (or declare) under penalty of perjury under the laws of the State of California that I have examined this performance of the statement, including accompanying schedules, statements or other attachments, and to the best of my knowledge and is true, correct, and complete and includes all property required to be reported which is owned, claimed, possessed, con or managed by the person named as the assessee in this statement at 12:01 a.m. on January 1, 20         SIGNATURE OF ASSESSEE OR AUTHORIZED AGENT*       DATE         NAME OF ASSESSEE OR AUTHORIZED AGENT* (typed or printed)       TITLE         NAME OF LEGAL ENTITY (other than DBA) (typed or printed)       TELEPHONE NUMBER       TITLE         PREPARER'S NAME AND ADDRESS (typed or printed)       TELEPHONE NUMBER       TITLE		ATTACH STATEMENT REC						OUR AIRCRAFT.
Proprietorship       Image: Composition of the following declaration must be completed and signed. If you do not do so, it may result in penal performance of the state of california that I have examined this performance of the statement, including accompanying schedules, statements or other attachments, and to the best of my knowledge and is true, correct, and complete and includes all property required to be reported which is owned, claimed, possessed, course or managed by the person named as the assessee in this statement at 12:01 a.m. on January 1, 20         SIGNATURE OF ASSESSEE OR AUTHORIZED AGENT*       DATE         NAME OF LEGAL ENTITY (other than DBA) (typed or printed)       TITLE         PREPARER'S NAME AND ADDRESS (typed or printed)       TELEPHONE NUMBER       TITLE		1	IF OWNERSHIP TY	PE IS LLC, PLE	EASE ATTACH A	LIST OF MEMBE	RS NAMES.	
Partnership       I certify (or declare) under penalty of perjury under the laws of the State of California that I have examined this preparation         Other       I certify (or declare) under penalty of perjury under the laws of the State of California that I have examined this preparation         Other       I certify (or declare) under penalty of perjury under the laws of the State of California that I have examined this preparation         Other       I certify (or declare) under penalty of perjury under the laws of the State of California that I have examined this preparation         Stepse       I certify (or declare) under penalty of perjury under the laws of the State of California that I have examined this preparetion         Stepse       I certify (or declare) under penalty of perjury under the laws of the State of California that I have examined this preparetion         Stepse       I certify (or declare) under penalty of perjury under the laws of the statements, and to the best of my knowledge and is true, correct, and complete and includes all property required to be reported which is owned, claimed, possessed, com or managed by the person named as the assessee in this statement at 12:01 a.m. on January 1, 20		NERSHIP TYPE (17)		_			—	
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Other       is statement, including accompanying schedules, statements or other attachments, and to the best of my knowledge and is true, correct, and complete and includes all property required to be reported which is owned, claimed, possessed, com or managed by the person named as the assessee in this statement at 12:01 a.m. on January 1, 20         SIGNATURE OF ASSESSEE OR AUTHORIZED AGENT*       DATE         NAME OF ASSESSEE OR AUTHORIZED AGENT* (typed or printed)       TITLE         NAME OF LEGAL ENTITY (other than DBA) (typed or printed)       FEDERAL EMPLOYER ID NUMBER         PREPARER'S NAME AND ADDRESS (typed or printed)       TITLE	Prop	prietorship <b>Not</b> e	e: The following dec					
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# **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 employee or agent where there is no 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.

