## 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.

NAME AND MAILING ADDRESS (Make n Г

Ventura, CA 93009-1270 (805) 654-2181	
assessor.countyofventura.org	

Assessor Of Ventura County

800 South Victoria Avenue

**Keith Taylor** 

(Make necessary corrections		d mailing addres	s)	٦	FOR	ASSESSOR'S USE C	JNLY
L							
SECTION I: MUST BE COMPLETE	) ANNUALLY						
1. FAA REGISTRATION NUMBER	DAYTIME PHC	ONE NUMBER	AIRCR	AFT LOCATION (	AIRPORT, HANGAR C	R TIE-DOWN NUMB	ER)
MANUFACTURER		MODEL	1				YEAR BUILT
SERIAL NUMBER		PURCHASE I	DATE	PURCHASE PR	RICE	DATE MOVED TO T	HIS COUNTY
FOR AIRCRAFT PREVIOUSLY REGISTE	RED OR ASSESSED II	N ANOTHER CA	LIFORN	A COUNTY, INDI	CATE COUNTY NAME	AND ASSESSMENT	YEARS
						COST	

FIXED BASE OPERATO	OR NAME			LAST MAJO	R AIRFRAME OVERHAUL DATE:	COST: \$
2. AIRCRAFT CON	DITION:					
WHEN PURCHASED	NEW	GOOD	AVERAGE	POOR	DAMAGE HISTORY	
CURRENT	NEW	GOOD	AVERAGE	POOR	YES NO IF YES, SEE IN	STRUCTIONS AND ATTACH STATEMENT
INTERIOR	NFW		AVERAGE	POOR	EQUIPMENT LEASED, EXCHAN	GED, ADDED OR RETIRED

CURRENT	NEW	GOOD	AVERAGE	POOR	YES NO IF YES, SEE INSTRUCTIONS AND ATTACH STATEMENT.
INTERIOR	NEW	GOOD			EQUIPMENT LEASED, EXCHANGED, ADDED OR RETIRED
EXTERIOR	NEW	GOOD	AVERAGE	POOR	YES NO IF YES, SEE INSTRUCTIONS AND ATTACH SCHEDULE.
3. TYPE OF USAG	E:				1
PERSONAL/PLEA	ASURE FLIC	GHT TRAINING		HARTER/TAXI	BUSINESS FRACTIONAL OWNERSHIP PROGRAM SHOW/MUSEUM

## 3. 1

NO IF YOU CHECKED CHARTER/TAXI, DO YOU USE THE AIRCRAFT IN COMMON CARRIAGE MORE THAN 50% OF THE TIME? YES

	NOTE: COMMON CARRIAGE DOES NOT INCLUDE FERRY FLIGHTS OR PART 91 OWNER FLIGHTS.
4.	AVIONICS SUMMARY: REPORT ONLY ADDED OR REPLACED AVIONICS. DO NOT REPORT ORIGINAL STANDARD FACTORY AVIONICS
	FOR CONDITION PLEASE ENTER (N) NEW (A) AVERAGE (P) POOR

	I	FOR CONDI	ITION, PLEAS	E ENTER (N)	NEW, (A) AVERAGE, (P) F	POOR.			
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					ENCODER				
EFIS ELECTRONIC FLIGHT INSTRUMENT SYSTEM					RMI RADIO MAGNETIC INDICATOR				
TCAS TRAFFIC ALERT COLLISION AVOIDANCE SYSTEM					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				
AUTOPILOT NUMBER OF AXIS					BOOTS				
FLIGHT DIRECTOR					HF TRANSCEIVERS HIGH FREQUENCY				
GPS IFR GLOBAL POSITIONING SYSTEM, INSTRUMENT FLIGHT RULES					OTHER NON-FACTORY AVIONICS				



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

EF-577-R07-0518-56000193-2 BOE-577 (P2) REV. 07 (05-18)

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

SECTION I: (continued	<u>1)</u>			1	_		
5. ENGINE	(S)	SINGLE	LEFT	RIGHT	6. TOTAL	AIRFRAME HOU	RS:
MAKE					_		
MODEL					_		
YEAR OF MANUFACT	JRE				FOR HELI	COPTERS - HOURS SINC	E MAJOR OVERHAUL:
HORSEPOWER					ENGINE	MAIN ROTOR	MAIN ROTOR
HOURS SINCE NEW						BLADES	HEAD ASSEMBLY
HOURS SINCE MAJOF					MAST	MAST TRANSMISSION	TAIL ROTOR DRIVESHAFT
TIME BETWEEN OVER	. ,				TAIL ROTOR	TAIL ROTOR HUB	TAIL ROTOR
HOURS SINCE MIDLIF					GEARBOX	ASSEMBLY	BLADES
DATE OF MAJOR OVE					SERVOS	MISCELLANEOUS	
DATE OF LANDING GE	AR OVERHAUL						I
ENGINE MAINTENAN NAME OF PROGRAM FOR HOMEBUILT, KI SECTION II: COMPL	/I: T, OR EXPERIN ETE IF FIRST T	MENTAL AIRCRA	AFT, ENTER EXA	ES WITHIN THE	RST FLIGHT: _	DATE:	
NAME AND ADDRESS (	OF OWNER IF DI	FFERENT FROM F	ADDR	-			
CITY				STA	TE ZIP CODE	COUNTY	
IF AIRCRAFT WAS SOL	D, ATTACH A CC	OMPLETE COPY O	F THE SALES CON	NTRACT	·		
IF SOLD OR DONATED:				PRICE			
			\$				
NEW OWNER NAME			ADDF	RESS			
CITY				STA	TE ZIP CODE	COUNTY	
					1		
				JONED		COUNTY	
DATE	EW LOCATION (IF	F MOVED)				COUNTY	
EXPLANATION						<u> </u>	
AIRCRAFT NOT HABIT	UALLY BASED II	N THIS COUNTY					
AIRPORT/FBO WHERE		т				HANGAR/TIE-DOWN	NO.
						COUNTY	
				STA	TE ZIP CODE		
CITY		IN THIS COUNTY:					
CITY		IN THIS COUNTY:			IN TRANSIT TO:		
CITY CHECK REASON AIRCF	RAFT IS OR WAS			FOR SALE	IN TRANSIT TO:		
CITY CHECK REASON AIRCF	RAFT IS OR WAS	RDING ANY ADD		FOR SALE	IN TRANSIT TO: OTHER: EEL WOULD ASS	IST US IN VALUING Y	OUR AIRCRAFT.
CITY CHECK REASON AIRCF ATTACH STAT	RAFT IS OR WAS EMENT REGA	RDING ANY ADD	DITIONAL INFOR	FOR SALE	IN TRANSIT TO: OTHER: EEL WOULD ASS LIST OF MEMBE	RS NAMES.	OUR AIRCRAFT.
CITY CHECK REASON AIRCF ATTACH STAT OWNERSHIP TYPE (	EMENT REGA	RDING ANY ADE OWNERSHIP T	DITIONAL INFOR YPE IS LLC, PLE	FOR SALE	IN TRANSIT TO: OTHER: EEL WOULD ASS LIST OF MEMBE	RS NAMES.	
CITY CHECK REASON AIRCF ATTACH STAT OWNERSHIP TYPE ( Proprietorship	EMENT REGA	RDING ANY ADE OWNERSHIP T	DITIONAL INFOR YPE IS LLC, PLE	FOR SALE	IN TRANSIT TO: OTHER: EEL WOULD ASS LIST OF MEMBE	RS NAMES.	
CITY CHECK REASON AIRCF ATTACH STAT OWNERSHIP TYPE (	TEMENT REGA	RDING ANY ADE OWNERSHIP T The following de r declare) under (	DITIONAL INFOR YPE IS LLC, PLE eclaration must penalty of perjur	FOR SALE	IN TRANSIT TO: OTHER: EEL WOULD ASS LIST OF MEMBE N BY ASSESSE Ind signed. If you s of the State of 0	RS NAMES. E do not do so, it may r California that I have e:	esult in penalties.
CITY CHECK REASON AIRCF ATTACH STAT OWNERSHIP TYPE ( Proprietorship Partnership	RAFT IS OR WAS TEMENT REGA IF I) <i>Note:</i> <i>I certify (or statement,</i>	RDING ANY ADE OWNERSHIP T The following de r declare) under f including accomp	DITIONAL INFOR YPE IS LLC, PLE eclaration must penalty of perjur panying schedules	FOR SALE	IN TRANSIT TO: OTHER: EEL WOULD ASS LIST OF MEMBE N BY ASSESSE Ind signed. If you s of the State of C other attachments,	RS NAMES. E do not do so, it may r California that I have ex and to the best of my k	esult in penalties. xamined this property mowledge and belief it
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CITY CHECK REASON AIRCF ATTACH STAT OWNERSHIP TYPE ( Proprietorship Partnership Corporation	RAFT IS OR WAS TEMENT REGA IF I) I) I) I certify (or statement, is true, corr	RDING ANY ADE OWNERSHIP T The following de r declare) under f including accomp rect, and complete or managed by the	DITIONAL INFOR YPE IS LLC, PLE eclaration must penalty of perjur panying schedules and includes all	FOR SALE	IN TRANSIT TO: OTHER: EEL WOULD ASS LIST OF MEMBE N BY ASSESSE Ind signed. If you s of the State of C other attachments, of to be reported with	RS NAMES. <b>E</b> do not do so, it may r California that I have ex and to the best of my k hich is owned, claimed, j at 12:01 a.m. on Januar	esult in penalties. xamined this property mowledge and belief it possessed, controlled,
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CITY CHECK REASON AIRCF ATTACH STAT OWNERSHIP TYPE ( Proprietorship Partnership Corporation Other SIGNATURE OF ASSESSEE NAME OF ASSESSEE OR A	RAFT IS OR WAS EMENT REGA IF I) I certify (or statement, is true, corr C E OR AUTHORIZED AUTHORIZED AGEN other than DBA) (typ	ARDING ANY ADE OWNERSHIP T The following de r declare) under r including accomp rect, and complete or managed by the AGENT* NT* (typed or printed)	DITIONAL INFOR YPE IS LLC, PLE eclaration must penalty of perjur panying schedules and includes all	FOR SALE	IN TRANSIT TO: OTHER: EEL WOULD ASS LIST OF MEMBE N BY ASSESSE and signed. If you s of the State of C other attachments, d to be reported with in this statement of DA	RS NAMES. E do not do so, it may r California that I have e: and to the best of my k hich is owned, claimed, j at 12:01 a.m. on Januar TE LE	esult in penalties. xamined this property mowledge and belief it possessed, controlled, y 1, 20
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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 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.

