EF-540-S-R06-0806-05000108-1

BOE-540-S (FRONT) REV. 6 (8-06)

20_____ MUTUAL OR PRIVATE WATER COMPANY PROPERTY STATEMENT OFFICIAL REQUIREMENT

A report submitted on this form is required of you by section 441(a) of the Revenue and Taxation Code (Code). The statement must be completed according to the instructions and filed with the Assessor on or before April 1, 20_____. Failure to file it on time will compel the Assessor's Office to estimate the value of your property from other information in its possession and add a penalty of 10 percent as required by Code section 463.

This statement is not a public document. The information contained herin will be held secret by the Assessor (Code section 451); it can be disclosed only to the district attorney, grand jury, and other age



Larie Durham Calaveras County Assessor

891 Mountain Ranch Road San Andreas, CA 95249 209.754.6356 assessorpublic@co.calaveras.ca.us

Water Rights Buildings Chter Source of Supply Chter Improvements Lakes and Springs Chter Source of Supply Wells Pump Equipment Purification Equipment Reservoirs Tanks T	ussessor (Code section 451); it can be disclosed only gencies specified in Code section 408. Attached schedu (Make necessary corrections to the printed name 1. NAME AND MAILING ADDRESS	(a	LOCATION OF EACH WATER SYSTEM: (a separate statement must be filed for each system located in this county. See Instructions.)						
FINANCIAL DATA FOR YEAR ENDING TANGIBLE PLANT (omit cents) BBAJANCE AT ADDITIONS DIRING ADJUSTMENTS AT END USE ONLY Land S S S S S S Water Rights Buildings Other Improvements Lakes and Springs Other Source of Supply Wells Pump Equipment Pump E									
TANGIBLE PLANT (omit cents) BALANCE ASSESSOR'S OF YEAR PERMINING OF YEAR S S S S S S S S S S S S S S S S S S	4. TYPE OF SERVICE: Domestic Irrigation 5.	OWNERSHIP: P	roprietorship [Partnership	Corporation	Other 6. YEAR STARTED	SERVICE		
TANGIBLE PLANT (omit cents) BALANCE ASSESSOR'S OF YEAR PERMINING OF YEAR S S S S S S S S S S S S S S S S S S		FINANCIAL	DATA FOR	YEAR ENDING					
Water Rights Buildings Chter Source of Supply Chter Improvements Lakes and Springs Chter Source of Supply Wells Pump Equipment Purification Equipment Reservoirs Tanks T		BALANCE AT BEGINNING	ADDITIONS DURING	RETIREMENTS DURING	OTHER	rs at end			
Other Improvements Lakes and Springs Other Source of Supply Wells Pump Equipment Purification Equipment Purification Equipment Reservoirs Tanks Mains Services Mains Services Mains Services Mothers Mothers Hydrants Office Furniture and Equipment Office Furniture and Equipment Total Plant (sum of above items) Acrued Depreciation Total Plant (sum of above items) DECLARATION BY ASSESSEE Note: The following declaration must be completed and signed. If you do not do so, it may result in penalties. It 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, correct, and complete and includes all property required to be reported which is owned, claimed, possessed, controlled, or managed by the person named as the assessee in this statement at 12:01 a.m. on January 1, 20 DATE DECLARATION BY ASSESSEE Note: The following declaration must be completed and signed. If you do not do so, it may result in penalties. Total Plant Les Accured Depreciation and the assessee in this statement at 12:01 a.m. on January 1, 20 DECLARATION BY ASSESSEE Note: The fol	Land	\$	\$	\$	\$	\$			
Other Improvements Lakes and Springs Cher Source of Supply Wells Pump Equipment Pump Equipment Reservoirs Tanks Mains Services Meters Hydrants Office Furniture and Equipment Mobile Equipment Office Furniture and Equipment Total Plant (sum of above items) Accrued Depreciation Construction Work in Progress Materials and Supplies REMARKS: DECLARATION BY ASSESSEE Note: The following declaration must be completed and signed. If you do not do so, it may result in penalties. It declare under penalty of perjury under the laws of the State of California that it have examined this property statement, including accompanying schedules, statements or other attachments, and to the best of my knowledge and belief it is true, correct, and complete and includes all property required to be reported which is owned, claimed, possessed, ontrolled, or managed by the person named as the assessee in this statement at 12:01 a.m. on January 1, 20 DATE ANAME OF ASSESSEE OR AUTHORIZED AGENT* (typed or printed) TITLE NAME OF ASSESSEE OR AUTHORIZED AGENT* (typed or printed) TITLE REDERAL EMPLOYER ID NUMBER	Water Rights								
Lakes and Springs Other Source of Supply Wells Pump Equipment Purification Equipment Reservoirs Tanks Mains Services Meters Hydrants Office Furniture and Equipment Mobile Equipment Not Licensed by DMV Tools, Shop and Other Equipment Mobile Equipment Not Licensed by DMV Tools, Shop and Other Equipment Total Plant (sum of above Items) Accrued Depreciation Total Plant (sum of above Items) Accrued Depreciation Total Plant Less Accrued Depreciation Total Plant Less Accrued Depreciation Foots Provided (sum of above Items) Accrued Depreciation Total Plant Less Accrued Depreciation Foots Total Plant Less Accrued Depreciation	Buildings								
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Wells Pump Equipment Pump Equipment Reservoirs Reservoirs Ranks Rains Services Reservoirs Reservoir	Lakes and Springs								
Pump Equipment Purification Equipment Reservoirs Tanks Mains Services Meters Hydrants Office Furniture and Equipment Mobile Equipment Not Licensed by DMV Tools, Shop and Other Equipment Mobile Equipment Not Licensed by DMV Tools, Shop and Other Equipment Total Plant (sum of above items) Accrued Depreciation Total Plant (sum of above items) Accrued Depreciation Construction Work in Progress Materials and Supplies REMARKS: DECLARATION BY ASSESSEE Note: The following declaration must be completed and signed. If you do not do so, it may result in penalties. I 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, correct, and complete and includes all property required to be reported which is owned, claimed, possessed, controlled, 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* NAME OF LEGAL ENTITY (other than DBA) (typed or printed) FEDERAL EMPLOYER ID NUMBER	Other Source of Supply								
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Reservoirs Tanks Mains Services Meters Hydrants Office Furniture and Equipment Mobile Equipment Not Licensed by DMV Tools, Shop and Other Equipment Total Plant (sum of above items) Accrued Depreciation Total Plant Less Acc	Pump Equipment								
Tanks Mains Services Meters Hydrants Office Furniture and Equipment Office Furniture and Equipment Office Furniture and Equipment Total Plant (sum of above items) Accrued Depreciation Total Plant (sum of above items) Accrued Depreciation Total Plant Less Accrued Depreciation Construction Work in Progress Materials and Supplies REMARKS: DECLARATION BY ASSESSEE Note: The following declaration must be completed and signed. If you do not do so, it may result in penalties. Ideclare 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, correct, and complete and includes all property required to be reported which is owned, claimed, possessed, controlled, or managed by the person named as the assessee in this statement at 12:01 a.m. on January 1, 20 DATE NAME OF LEGAL ENTITY (other than DBA) (typed or printed) FEDERAL EMPLOYER ID NUMBER	Purification Equipment								
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Materials and Supplies REMARKS: DECLARATION BY ASSESSEE Note: The following declaration must be completed and signed. If you do not do so, it may result in penalties. I 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, correct, and complete and includes all property required to be reported which is owned, claimed, possessed, controlled, 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	Total Plant Less Accrued Depreciation								
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DECLARATION BY ASSESSEE Note: The following declaration must be completed and signed. If you do not do so, it may result in penalties. I 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, correct, and complete and includes all property required to be reported which is owned, claimed, possessed, controlled, 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	Materials and Supplies								
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NAME OF ASSESSEE OR AUTHORIZED AGENT* (typed or printed) TITLE NAME OF LEGAL ENTITY (other than DBA) (typed or printed) FEDERAL EMPLOYER ID NUMBER	I declare under penalty of perjury under the laws of attachments, and to the best of my knowledge an	of the State of Cali d belief it is true,	ifornia that İ ha correct, and co	ve examined this property in the property in t	oroperty stateme es all property re	ent, including accompanyi			
NAME OF LEGAL ENTITY (other than DBA) (typed or printed) FEDERAL EMPLOYER ID NUMBER	SIGNATURE OF ASSESSEE OR AUTHORIZED AGENT*			,		DATE			
	NAME OF ASSESSEE OR AUTHORIZED AGENT* (typed or printed)	TITLE	TITLE						
	NAME OF LEGAL ENTITY (other than DRA) (typed or printed)		EFDERAL EMPLOYER ID NI IMBER						
PREPARER'S NAME AND ADDRESS (typed or printed) TELEPHONE NUMBER ()						. 252.3.2 ZWI EGTERID NOT	···		
	PREPARER'S NAME AND ADDRESS (typed or printed)			TELEPHONE NUMBER		TITLE	TITLE		

*Agent: see back for Declaration by Assessee instructions. THIS STATEMENT SUBJECT TO AUDIT



STATISTICAL DATA AS OF DECEMBER 31, 20 ___

	YEAR INSTALLED	ORIGINAL COST	NUMBER	TYPE	SIZE OR CA- PACITY	LENGTH OR DEPTH	LOCATION	ASSESSOR'S USE ONLY
Buildings		\$						
Other improvements								
Lakes and springs								
Other source of supply								
Wells								
Pump equipment								
Purification equipment								
Reservoirs								
Tanks								
Mains — pipe lines — canals & ditches								
Services								
Meters								
Hydrants								
Office furniture and equipment								
Average number of customers during year Total amount of water delivered during year Does company own water rights in this county in addition to the water system? Yes No If yes, attach a listing and description of the water rights. PROPERTY OWNED BY OTHERS								
Did you hold merchandise or other personal property on consignment at 12:01 a.m. on January 1? Yes No If yes, list the name and address of the consignor, quantity, description and total amount to be remitted to consignor on a separate schedule and attach to this statement.								

Did you hold equipment belonging to others on a loan, rental or lease basis at 12:01 a.m. on January 1? Ures No If yes, list the name and address of the owner or lessor, description, year constructed, cost if purchased, and rental on a separate schedule and attach to this statement.

Are any other individuals, partnerships, corporations, or joint ventures doing business on your premises? Uses In the name and address of the owner and briefly describe the nature of the business on a separate schedule and attach to this statement.

The Assessor may provide forms to allocate by code area the property described in this statement. All property (wells, pump houses, pumping plants, reservoirs, tanks, pipe lines, services, etc.) located on land owned by the assessee must be identified by the Assessor's Parcel Number of the land upon which located. If additional space is needed, attach a schedule that lists the parcel numbers.

The exact location of personal property (office furniture and equipment, other equipment, unlicensed equipment, construction work in progress, materials and supplies) on the land owned by the assessee, must be identified by the Assessor's Parcel Number of the land upon which located. If additional space is needed, attach a schedule that lists the parcel numbers.

Each system which is not connected to any other system by pipe lines or canals is considered to be a unit for appraisal purposes.

If costs are available, complete the schedule of Financial Data on the front of the property statement, along with the statistical data on the reverse side.

If cost data is not available and it is not feasible to develop cost, a description of the physical property, with date of construction or installation and original costs, should be reported in the schedule headed, Statistical Data as of December 31, 20 ...

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 a member 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.

