20 _____ AIRPORT OPERATIONS REPORT



Mono County Office of the Assessor Barry Beck, Assessor

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TO OWNERS AND OPERATORS OF PRIVATE AND PUBLIC AIRPORTS: Section 5368 of the Revenue and Taxation Code requires this form to be completed and returned to the County Assessor upon request. Pursuant to this section, the County Assessor hereby requests information regarding the aircraft registration number, make, model and arrival and departure information of all aircraft utilizing your airport facilities for the calendar year. The requested information may be provided in electronic format.

| COUNTY | | AIRPORT NAME | CALENDAR YEAR | | |
|---------------------------------|---------------------------------|-----------------------------------------------------------------------------|---------------|---------------------|--|
| AIRCRAFT REGISTRATION NUMBER | AIRCRAFT TYPE MAKE AND MODEL | AIRCRAFT IDENTIFICATION INDICATE IF ARRIVAL OR (FLIGHT NUMBER) DEPARTURE | | LOCAL TIME AND DATE | |
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CERTIFICATION

| I certify (or declare) und | er penalty of perjury ur | nder the laws of the State | e of California that the | e foregoing and all | information hereon, | including any |
|----------------------------|--------------------------|----------------------------|--------------------------|---------------------|---------------------|---------------|
| ac | companying statemen | ts or documents, is true | and correct to the be | st of my knowledge | e and belief. | |

| SIGNATURE | DATE |
|----------------|-----------------------|
| NAME | TITLE |
| E-MAIL ADDRESS | DAYTIME TELEPHONE () |

THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION

