EF-577-A-R02-0809-29000189-1 BOE-577-A REV. 02 (08-09)

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AIRPORT OPERATIONS REPORT

Rolf D. Kleinhans **Nevada County Assessor**

Attn: Business Property Division 950 Maidu Avenue P.O. Box 599002 Nevada City, CA 95959-7902 Telephone (530) 265-1259 Fax (530) 265-9858

Email: assessor@nevadacountyca.gov

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 (FLIGHT NUMBER)	INDICATE IF ARRIVAL OF DEPARTURE	LOCAL TIME AND DATE
		CERTIFICATION		
I certify (or declare) under pe accom	enalty of perjury under the la panying statements or docu	ws of the State of California th ments, is true and correct to th	at the foregoing and all in he best of my knowledge a	formation hereon, including any and belief.
SIGNATURE			DATE	
NAME			TITLE	
E-MAIL ADDRESS			DAYTIME (TELEPHONE

THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION

