20 \_\_\_\_\_ AIRPORT OPERATIONS REPORT



Matthew R. Maynard Placer County Assessor 2980 Richardson Drive Auburn, CA 95603-2640 Phone: (530) 889-4300 Email: assessor@placer.ca.gov Website: www.placer.ca.gov/assessor

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 OR DEPARTURE	LOCAL TIME AND DATE	

## CERTIFICATION

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	accompanying statem	ents or documents i	e true and	correct to the	hest of m	(knowlodd	na and haliaf		
I certify (or declare)	under penalty of perjury	<sup>,</sup> under the laws of th	e State of 0	California tha	t the forego	oing and a	ll information here	eon, including a	ny

	DATE
NAME	TITLE
E-MAIL ADDRESS	DAYTIME TELEPHONE ( )

## THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION

