EF-577-R03-0810-34000794-1 BOE-577 (P1) REV. 03 (08-10)

## AIRCRAFT PROPERTY STATEMENT

information as of 12:01 a.m., January 1, 20\_



# **CHRISTINA WYNN** SACRAMENTO COUNTY ASSESSOR

AIRCRAFT SECTION 3636 American River Drive, Suite 200 Sacramento, CA 95864-5952 Phone (916) 875-0740 FAX (916) 875-0735

Declaration of costs and other related property
=   ppy
information of 12.01 a.m. January 1 20

FILE RETURN BY:	IRN BY: https://assessor.saccounty.gov								
PLEASE NOTE: This form mus office, regardless of the status Claim. Penalties will apply if no	of the Histori								
NAME AND MAILING A (Make necessary correc		nted name and	d mailing add	dress)		FOR AS	SSESSOR'S	S USE ONLY	
r ,	·		J	,		TONNE	JOE GOOK C	OGE GIVE	
L									
SECTION I: MUST BE COMPI					A ET 1 00 ATION (AIDDODT		TIE DOI:401		
FAA REGISTRATION NUMBER	l l	DAYTIME PHO	ONE NOMBE	R AIRCR	AFT LOCATION (AIRPORT,	, HANGAR OR	HE-DOWN	NUMBER)	
MANUFACTURER		( )	MODEL					,	YEAR BUILT
SERIAL NUMBER				ATE MOVE	D TO THIS CO	DUNTY			
FOR AIRCRAFT PREVIOUSLY RE	GISTERED OR	ASSESSED I	 N ANOTHER	R CALIFORNI	\$ A COUNTY, INDICATE COI	JNTY NAME AI	ND ASSESS	SMENT YEAR:	S
FIXED BASE OPERATOR NAME				LAST MAJOF	R AIRFRAME OVERHAUL [	DATE: C	OST:		
AIRCRAFT CONDITION:									
WHEN PURCHASED NEV	V GOOI	D AVE	ERAGE [	POOR	DAMAGE HISTORY				
CURRENT NEV	V 🔲 G001	D AVE	ERAGE	POOR	☐YES ☐ NO IF				
INTERIOR ONEW GOOD AVERAGE POOR EQUIPMENT LEASED, EXCHANGED, AL			-						
EXTERIOR NEV	V G00I	D AVE	ERAGE	POOR	☐YES ☐ NO IF	YES, SEE INST	RUCTIONS	S AND ATTACK	H SCHEDULE.
TYPE OF USAGE:		IO DENT		DTED/TAX/		FIONIAL OVAINE		NODAM	1014//841 1051 184
IF YOU CHECKED CHART		OU USE THE	AIRCRAFT				IME?	YES NO	HOW/MUSEUM
AVIONICS SUMMARY: REPORT ONLY AD								(N) NEW (Δ) Δ\/E	RAGE (P) POOR
UNIT	ACQUISITION DATE	COST	CONDITION	ASSESSOR USE ONLY	UNIT	ACQUISITION DATE	COST	CONDITION	ASSESSOR USE ONLY
RVSM REDUCED VERTICAL SEPARATION MINIMUM	DAIL	NEW		OOL ONL!	RADAR ALTIMETER	DAIL	INEW		OOL ONE!
MONITOR					ENCODER				
TERRAÍN AWARENESS WARNING SYSTEM  EFIS					RMI				
TCAS					RADIO MAGNETIC INDICATOR  VLF				
TRAFFIC ALERT COLLISION AVOIDANCE SYSTEM  NAVCOM #1					VERY LOW FREQUENCY PHONE				
NAVCOM#1					RADAR				
TRANSPONDER					LORAN				
A C					LONAIN				
GLIDESLOPE					ADF AUTOMATIC DIRECTION FINDER				
LOCALIZER					DME DISTANCE MEASURING EQUIPMENT				
COMPASS SYSTEM/HSI HORIZONTAL SITUATION INDICATOR					AIR CONDITIONING				
AUTOPILOT NUMBER OF AXES					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



TOTAL AIRFRA	ME HOURS AS OF	JANUARY 1:

TOTAL AIRT RAINE TOOKS A	JOI DANGART I.		I					
ENGINE(S)	SINGLE	LEFT	RIGHT	_		COPTERS - HOURS SINC		
MAKE					ENGINE	MAIN ROTOR BLADES	MAIN ROTOR HEAD ASSEMBLY	
MODEL				<b></b>	MAST	MAST	TAIL ROTOR	
YEAR OF MANUFACTURE				_		TRANSMISSION	DRIVESHAFT	
HORSEPOWER					TAIL ROTOR GEARBOX	TAIL ROTOR HUB ASSEMBLY	TAIL ROTOR BLADES	
HOURS SINCE NEW				- 1 ⊢	SERVOS	MISCELLANEOUS		
HOURS SINCE MAJOR OVERHAUL*								
TIME BETWEEN OVERHAULS (TBO)*				*	AS OF JANUARY	1.		
ENGINE MAINTENANCE SER	VICE PROGRAM: [	YES NO						
NAME OF PROGRAM:			/			TDATE:		
FOR HOMEBUILT, KIT, OR EX	PERIMENTAL AIRC	RAFI, ENTER EX	KACI DATE C	FFIRS	ST FLIGHT:			
SECTION II: COMPLETE IF FI NAME AND ADDRESS OF OWNER		M FAA REGISTERE	D OWNER	THE L	AST CALENI	DAR YEAR		
NAME		ADI	DRESS					
CITY				STATE	ZIP CODE	COUNTY		
IF SOLD OR DONATED: DATE O	OF SALE \$	SALE PRICE						
NEW OWNER NAME			DRESS					
CITY				STATE	ZIP CODE	COUNTY		
IF: MOVED JUNKED	PARTED DEST	TROYED ABA	NDONED					
DATE NEW LOCATION (IF MOVED)						COUNTY		
EXPLANATION								
AIDCDAET NOT HADITHALLY DA	SED IN THIS COUNT	,						
AIRCRAFT NOT HABITUALLY BASED IN THIS COUNTY  AIRPORT/FBO WHERE NORMALLY KEPT					HANGAR/TIE-DOWN NO.			
CITY				STATE	ZIP CODE	COUNTY		
CHECK REASON AIRCRAFT IS OF	R WAS IN THIS COUN	TY: REPAIRS	FOR SALE		TRANSIT TO:			
				o	THER:			
ATTACH STATEMENT I		DDITIONAL INFO					YOUR AIRCRAFT.	
OWNERSHIP TYPE (☑)		,			BY ASSESS			
Proprietorship /	Vote: The following	declaration mus	st be complet	ed and	d signed. If yo	ou do not do so, it ma	y result in penalties.	
Corporation state	ment, including acco e, correct, and comp	mpanying schedu lete and includes a	iles, statemen all property re	ts or ot quired	her attachmen to be reported	ts, and to the best of m	e examined this property y knowledge and belief it d, possessed, controlled, uary 1, 20	
SIGNATURE OF ASSESSEE OR AUTHO		,				DATE	· · —	
NAME OF ASSESSEE OF AUTHORIZE	D AGENT* (tupod or prints	d)			-	TITLE		
NAME OF ASSESSEE OR AUTHORIZED AGENT* (typed or printed)						IIILE		
NAME OF LEGAL ENTITY (other than DBA) (typed or printed)						FEDERAL EMPLOYER ID NUMBER		
PREPARER'S NAME AND ADDRESS (t)	rped or printed)		TELEPHO	NE NUM	BER	TITLE		
E-MAIL ADDRESS			\	/				

\* AGENT: SEE INSTRUCTIONS FOR DECLARATION BY ASSESSEE THIS STATEMENT IS SUBJECT TO AUDIT



### 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 LLC 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.

### 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.



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