EF-577-R06-0516-39000789-1 BOE-577 (P1) REV. 06 (05-16)

## **AIRCRAFT PROPERTY STATEMENT**



# Steve J. Bestolarides **Assessor-Recorder-County Clerk**

San Joaquin County 44 N San Joaquin Street Suite 230 Stockton, CA 95202-3273 Telephone: (209) 468-2678 https://www.sjgov.org/department/assessor

Declaration of costs and other related property	
information as of 12:01 a m. January 1 20	

FILE RETURN BY:					_										
PLEASE NOTE: Th Assessor's office, Historical Aircraft E if not filed.	reg Exen	jardle nptio	ess n Cla	of t	he st	atus	of ar	ıy							
NAME AND MAILING ADDRESS (Make necessary corrections to the printed name and mailing a							mailing add	dress)		٦	FOR ASSESSOR'S USE ONLY				
SECTION I: MUST BE	COM	IDI FT	FD A	NNII	ΔΙΙΥ					J					
FAA REGISTRATION NUM						E PHO	NE NUMBE	R .	AIRCR	AFT LOCATION (A	IRPORT,	HANGAR OR	TIE-DOWN	NUMBER)	
N				(		)	1								
MANUFACTURER						MODEL				YEAR BU				YEAR BUILT	
SERIAL NUMBER							PURCHA	SE DA	ATE	PURCHASE PRICE			DATE MOVED TO THIS COUNTY		
FOR AIRCRAFT PREVIOU	JSLY I	REGIS	TERE	D OR	ASSES	SED II	N ANOTHE	R CALI	IFORN	1 *	ATE COL	JNTY NAME A	ND ASSES	SMENT YEAR	S
FIXED BASE OPERATOR NAME						LAS				R AIRFRAME OVE	-		COST:		
AIRCRAFT CONDITIO	N:														
WHEN PURCHASED NEW GOOD AVERAGE							PO	OR	DAMAGE HISTORY					ОТАТЕЛЛЕЛІ	
CURRENT	ENT NEW GOOD AVERAGE POOR YES NO IF YES, SEE INSTRUCTIONS														
INTERIOR NEW GOOD					=	AVERAGE PO						GED, ADDED OR RETIRED ISTRUCTIONS AND ATTACH SCHEDULE.			
EXTERIOR [	IN	EW	Ш	GOOL	, _	AVE	RAGE [	PC	OOR	YES	INO IF	res, see iins	IRUCTIONS	SANDATIAC	H SCHEDULE.
TYPE OF USAGE:  PERSONAL/PLEASUR	RE	FLIGH	HT TR	AININ	G F	RENTA	L CHA	RTER	/TAXI	BUSINESS	FRACT	TIONAL OWNE	RSHIP PRO	OGRAM S	HOW/MUSEUM
IF YOU CHECKED		RTER/	TAXI,	DO Y	OU USE	THE	AIRCRAFT	IN CO	MMON	CARRIAGE MORI				YES NO	
AVIONICS	SUMI	MARY:	REPC							S. DO NOT REPOR NEW, (A) AVERAG			RD FACTO	RY AVIONICS	
UNIT			ACQUISITION DATE			T (	CONDITION		ESSOR ONLY	UNIT	UNIT ACQUISITIO DATE			CONDITION	ASSESSOR USE ONLY
RVSM REDUCED VERTICAL SEPARATION MINIT MONITOR	мим									RADAR ALTIMETER	₹				
TAWS TERRAIN AWARENESS WARNING SYSTEM									ENCODER						
EFIS ELECTRONIC FLIGHT INSTRUMENT SYSTEM										RMI RADIO MAGNETIC INDICATO	OR .				
TCAS TRAFFIC ALERT COLLISION AVOIDANCE SYSTEM										VLF VERY LOW FREQUENCY					
NAVCOM #1										PHONE					
NAVCOM #2										RADAR					
TRANSPONDER A C										LORAN					
GLIDESLOPE										ADF AUTOMATIC DIRECTION FIN	DER				
LOCALIZER										DME DISTANCE MEASURING EQU	JIPMENT				
COMPASS SYSTEM/HSI HORIZONTAL SITUATION INDICATOR										AIR CONDITIONING	9				
AUTOPILOT  NUMBER OF AXES										BOOTS					
FLIGHT DIRECTOR										HF TRANSCEIVERS	S				
GPS IFR GLOBAL POSITIONING SYSTEM, INSTRU FLIGHT RULES	IMENT									OTHER NON-FACT AVIONICS	ORY				
		TH	E DE			NRV	VGGEGGE	E ON	IDAG	F 2 MUST BE CO	MDI E	TED AND SI	CNED	•	

THIS DOCUMENT IS NOT SUBJECT TO PUBLIC INSPECTION



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BOE-577 (P2) REV. 06 (05-16)) SECTION 1: (continued)

# PLEASE ENTER INFORMATION AS OF JANUARY 1 OF THIS YEAR.

AIRFRAME HOURS:										
ENGINE(S)	LEFT	LEFT RIGHT				FOR HELICOPTERS - HOURS SINCE MAJOR OVERHAUL:				
MAKE						ENGINE	MAIN ROTOR BLADES	MAIN ROTOR HEAD ASSEMBLY		
MODEL					<b>↓</b> ├	MAST	MAST	TAIL ROTOR		
YEAR OF MANUFACTURE					<b>↓</b>		TRANSMISSION	DRIVESHAFT		
HORSEPOWER						TAIL ROTOR GEARBOX	TAIL ROTOR HUB ASSEMBLY	TAIL ROTOR BLADES		
HOURS SINCE NEW					4	SERVOS	MISCELLANEOUS			
HOURS SINCE MAJOR OVERHAUL					<u> </u>					
TIME BETWEEN OVERHAULS (TBO)					4					
HOURS SINCE MIDLIFE										
DATE OF MAJOR OVERHAUL										
DATE OF LANDING GEAR OVERHAUL										
ENGINE MAINTENANCE SERV NAME OF PROGRAM: FOR HOMEBUILT, KIT, OR EXP SECTION II: COMPLETE IF FIR	ERIMENTAL AIRCE	R IF ANY CH	EXACT D	THIN T	FIRS	ST FLIGHT:	DAR YEAR			
NAME AND ADDRESS OF OWNER NAME	IF DIFFERENT FROM		ADDRESS	ER						
NAME			ADDRESS							
CITY		l		S	TATE	ZIP CODE	COUNTY			
IF AIRCRAFT WAS SOLD, ATTACH	A COMPLETE COPY	OF THE SALE	S CONTRA	СТ		1	•			
IF SOLD OR DONATED: DATE OF	SALE		SALE PRIC	E						
NEW OWNER NAME			\$ ADDRESS							
CITY				S	TATE	ZIP CODE	COUNTY			
IF: MOVED JUNKED DATE NEW LOCATION	ROYED A	)		COUNTY						
EXPLANATION										
AIRCRAFT NOT HABITUALLY BAS	ED IN THIS COUNTY	*								
AIRPORT/FBO WHERE NORMALLY	KEPT						HANGAR/TIE-DOV	VN NO.		
CITY			S	TATE	ZIP CODE	COUNTY	COUNTY			
CHECK REASON AIRCRAFT IS OR	TY: REPAIR	RS FOR	SALE	IN	I TRANSIT TO:	:				
	OTHER:									
ATTACH STATEMENT R	EGARDING ANY A IF OWNERSHIP							YOUR AIRCRAFT.		
Partnership Corporation  I certif statem is true	ote: The following by (or declare) under tent, including accord by correct, and com	declaration in the penalty of penalty of penalty school plete and incomplete and	DECI must be co perjury und edules, stat cludes all	LARAT empleted fer the later fements property	ION d and aws o or oth / req	BY ASSESS d signed. If you of the State of their attachment duired to be r	SEE ou do not do so, it may f California that I have ts, and to the best of m	examined this property y knowledge and belief it ed, claimed, possessed,		
SIGNATURE OF ASSESSEE OR AUTHOR							DATE			
<b>&gt;</b>										
NAME OF ASSESSEE OR AUTHORIZED	AGENT* (typed or printed		TITLE							
NAME OF LEGAL ENTITY (other than DB)	A) (typed or printed)		FEDERAL EMPLOYER ID NUMBER							
PREPARER'S NAME AND ADDRESS (typ		TE	TELEPHONE NUMBER			TITLE				
E MAII ADDDDGGG			(	)						
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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