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William F Rousseau Sonoma County Clerk-Recorder-Assessor

Business Property Division 585 Fiscal Dr., Rm 104 Santa Rosa, CA 95403-2872 Telephone: (707) 565-1330 FAX: (707) 565-3317

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DAYTIME TELEPHONE

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							
I certify (or declare) under pe	nalty of perjury under the la panying statements or docu	aws of the State of California th uments, is true and correct to th	nat the foregoing and all info	rmation hereon, including any d belief.			
SIGNATURE			DATE				

THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION



NAME

E-MAIL ADDRESS