EF-577-R07-0518-53000240-1 BOE-577 (P1) REV. 07 (05-18)

AIRCRAFT PROPERTY STATEMENT

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



Shanna White County Clerk-Recorder-Assessor

P.O. Box 1255 Weaverville, CA 96093 Phone: (530) 623-1257 Fax: (530) 623-8398 assessor@trinitycounty.org

FILE RETURN BY:	· · · · · · · · · · · · · · · · · · ·										
PLEASE NOTE: This form Assessor's office, regardles Aircraft Exemption Claim. I	ss of the st	atus of an	y Historic	cal							
NAME AND MAILING AE (Make necessary correct	٦	FOR ASSESSOR'S USE ONLY									
SECTION I: MUST BE COMPLETED ANNUALLY											
1. FAA REGISTRATION NUMBER		DAYTIME PHO	ONE NUMBE	ER AIRCR	AFT LOCATION (AIRPORT	, HANGAR OR	TIE-DOWN	NUMBER)			
N MANUFACTURER		()	MODEL			YEAR			YEAR BUILT		
SERIAL NUMBER			DI IDCH/	ASE DATE	PURCHASE PRICE	l r	DATE MOVED TO THIS COUNTY				
SERIAL NUMBER					\$						
FOR AIRCRAFT PREVIOUSLY REG	ISTERED OR	ASSESSED	IN ANOTHE	R CALIFORN	IA COUNTY, INDICATE CO	UNTY NAME A	ND ASSESS	SMENT YEAR:	S		
FIXED BASE OPERATOR NAME				LAST MAJOR	R AIRFRAME OVERHAUL I		COST:				
2. AIRCRAFT CONDITION:											
WHEN PURCHASED NEW GOOD AVERAGE POOR DAMAGE HISTORY											
CURRENT NEW GOOD AVERAGE POOR YES NO IF YES, SEE INSTRUCTIONS AND ATTACH STATEMENT INTERIOR NEW GOOD AVERAGE POOR EQUIPMENT LEASED, EXCHANGED, ADDED OR RETIRED											
INTERIOR											
3. TYPE OF USAGE:			- [
PERSONAL/PLEASURE FLI						TIONAL OWNE			10W/MUSEUM		
IF YOU CHECKED CHARTE					I CARRIAGE MORE THAN ERRY FLIGHTS OR PART !			ES NO			
4. AVIONICS SUMMAR					S. DO NOT REPORT ORIG		RD FACTOR	RY AVIONICS.			
ACQUISITION COST			CONDITION	ASSESSOR	NEW, (A) AVERAGE, (P) F	ACQUISITION	COST	CONDITION	ASSESSOR		
RVSM	DATE	NEW	CONDITION	USE ONLY	RADAR ALTIMETER	DATE	NEW	CONDITION	USE ONLY		
REDUCED VERTICAL SEPARATION MINIMUM MONITOR					RADAR ALTIWETER						
TAWS TERRAIN AWARENESS WARNING SYSTEM					ENCODER						
EFIS ELECTRONIC FLIGHT INSTRUMENT SYSTEM					RMI RADIO MAGNETIC INDICATOR						
TCAS TRAFFIC ALERT COLLISION AVOIDANCE SYSTEM					VLF VERY LOW FREQUENCY						
NAVCOM #1					PHONE						
NAVCOM #2					RADAR						
TRANSPONDER A C					LORAN						
GLIDESLOPE					ADF AUTOMATIC DIRECTION FINDER						
LOCALIZER					DME DISTANCE MEASURING EQUIPMENT						
COMPASS SYSTEM/HSI HORIZONTAL SITUATION INDICATOR					AIR CONDITIONING						
AUTOPILOT					BOOTS	1					

THE DECLARATION BY ASSESSEE ON PAGE 2 MUST BE COMPLETED AND SIGNED THIS DOCUMENT IS NOT SUBJECT TO PUBLIC INSPECTION

HF TRANSCEIVERS

AVIONICS

OTHER NON-FACTORY



NUMBER OF AXIS FLIGHT DIRECTOR

GPS IFR GLOBAL POSITIONING SYSTEM, INSTRUMENT FLIGHT RULES BOE-577 (P2) REV. 07 (05-18) **SECTION I: (continued)**

PLEASE ENTER INFORMATION AS OF JANUARY 1 OF THIS YEAR.

5.	ENGINE(S)	SINGLE	LEFT		RIGHT		6. TOTAL AIRFRAME HOURS:			
	MAKE						5. IOIA	LAINI NAME 1100		
	MODEL									
	YEAR OF MANUFACTURE						FOR HELICOPTERS - HOURS SINCE MAJOR OVERHAUL:			
	HORSEPOWER HOURS SINCE NEW						ENGINE	MAIN ROTOR BLADES	MAIN ROTOR HEAD ASSEMBLY	
	HOURS SINCE MAJOR OVERHAUL						MAST	MAST	TAIL ROTOR	
	TIME BETWEEN OVERHAULS (TBO)							TRANSMISSION	DRIVESHAFT	
	HOURS SINCE MIDLIFE						TAIL ROTOR GEARBOX	TAIL ROTOR HUB ASSEMBLY	TAIL ROTOR BLADES	
	DATE OF MAJOR OVERHAUL						SERVOS	MISCELLANEOUS		
	DATE OF LANDING GEAR OVERHAUL									
FO SE	GINE MAINTENANCE SERVICE ME OF PROGRAM: R HOMEBUILT, KIT, OR EXPER CTION II: COMPLETE IF FIRST	IMENTAL AIRCRA	AFT, ENTER	R EXACT I	WITHIN	FIRS	ST FLIGHT:	DATE:	<u> </u>	
NA NA	ME AND ADDRESS OF OWNER IF I	DIFFERENT FROM I	AA REGIST	ADDRESS						
				, IBBREOG						
CIT	TY					STATE	ZIP CODE	COUNTY		
IF A	IRCRAFT WAS SOLD, ATTACH A C	OMPLETE COPY O	F THE SALE	S CONTRA	ACT					
IF S	OLD OR DONATED: DATE OF SA	ALE .		SALE PRI	CE					
NE	W OWNER NAME			\$ ADDRESS	3					
	W OWNER W WILL			ADDITEOC	,					
CIT	Y			I		STATE	ZIP CODE	COUNTY		
IF:	MOVED JUNKED PA	RTED DESTRO	OYED A	ABANDONE	ĒD.		ı.			
DA								COUNTY		
		,								
EXI	PLANATION							·		
AIR	CRAFT NOT HABITUALLY BASED	IN THIS COUNTY								
	PORT/FBO WHERE NORMALLY KE							HANGAR/TIE-DOWN	I NO.	
017										
CITY						STATE	ZIP CODE	COUNTY		
СН	ECK REASON AIRCRAFT IS OR WA	S IN THIS COUNTY	REPAI	RS FOF	R SALE		TRANSIT TO:			
	OTHER:									
	ATTACH STATEMENT REG								OUR AIRCRAFT.	
_		IF OWNERSHIP T	YPE IS LLO	C, PLEASI	E ATTAC	HAL	ST OF MEMB	ERS NAMES.		
O	WNERSHIP TYPE (☑)					_	BY ASSESS			
		: The following d	eclaration	must be o	complete	ed and	l signed. If yo	u do not do so, it may ı	result in penalties.	
	Partnership									
	Statement, including accompanying schedules, statements or other attachments, and to the best of my knowledge and belief it is true, correct, and complete and includes all property required to be reported which is owned, claimed, possessed, controlled,									
_	is true, co						•	vriich is owned, claimed, t at 12:01 a.m. on Janua	•	
SIG	NATURE OF ASSESSEE OR AUTHORIZE	• .						ATE	, , , = , .	
NAME OF ASSESSEE OR AUTHORIZED AGENT* (typed or printed)							TITLE			
_										
NA	ME OF LEGAL ENTITY (other than DBA) (t	yped or printed)					F	EDERAL EMPLOYER ID NUMB	ER	
PR	EPARER'S NAME AND ADDRESS (typed o	or printed)			TELEPHON	NE NUM	BER T	ITLE		
E-N	MAIL ADDRESS					'				

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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