EF-577-R05-0515-51000614-1 BOE-577 (P1) REV. 05 (05-15)

## **AIRCRAFT PROPERTY STATEMENT**



# **TODD L. RETZLOFF, CCIM SUTTER COUNTY**

1190 Civic Center Blvd. Yuba City, CA 95993 Telephone (530) 822-7160 FAX (530) 822-7198 www.suttercounty.org/assessor Email: assessor@co.sutter.ca.us

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

NAME AND MAILING ADDRESS (Make necessary corrections to the printed name and mailing address)  SECTION I: MUST BE COMPLETED ANNUALLY  FAA REGISTRATION NUMBER N DAYTIME PHONE NUMBER N AIRCRAFT LOCATION (AIRPORT, HANGAR OR TIE-DOWN NUMBER) N AND MANUFACTURER  MODEL  YEAR BUILT  SERIAL NUMBER PURCHASE DATE PURCHASE DATE PURCHASE PRICE DATE MOVED TO THIS COUNTY  FOR AIRCRAFT PREVIOUSLY REGISTERED OR ASSESSED IN ANOTHER CALIFORNIA COUNTY, INDICATE COUNTY NAME AND ASSESSMENT YEARS  FIXED BASE OPERATOR NAME  AIRCRAFT CONDITION: WHEN PURCHASED  NEW GOOD AVERAGE POOR  DAMAGE HISTORY VES DO JEVES SEE INSTRUCTIONS AND ATTACH STATEMENT.	FILE RETURN BY:					_										
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SERIAL NUMBER  PURCHASE DATE  PURCHASE PRICE  \$ DATE MOVED TO THIS COUNTY  SERIAL NUMBER  PURCHASE PRICE  \$ DATE MOVED TO THIS COUNTY  NAME AND ASSESSMENT YEARS  FIXED BASE OPERATOR NAME    LAST MAJOR AIRFRAME OVERHAUL DATE: COST.	N				(		)									
FOR AIRCRAFT PREVIOUSLY REGISTERED OR ASSESSED IN ANOTHER CALIFORNIA COUNTY, INDICATE COUNTY NAME AND ASSESSMENT YEARS    LAST MAJOR AIRFRAME OVERHAUL DATE:	MANUFACTURER							MODEL								YEAR BUILT
FIXED BASE OPERATOR NAME  LAST MAJOR AIRFRAME OVERHAUL DATE:  \$  AIRCRAFT CONDITION:  WHEN PURCHASED   NEW   GOOD   AVERAGE   POOR    UNTERIOR   NEW   GOOD   AVERAGE   POOR    UNTO CHECKED CHARTER/TAXI, DO YOU USE THE AIRCRAFT IN COMMON CARRIAGE MORE THAN 50% OF THE TIME?   YES   NO    NOTE: COMMON CARRIAGE DOES NOT INCLIDE FERRY FLIGHTS OF PART 91 OWNER FLIGHTS.  AVIONICS SUMMARY: REPORT ONLY ADDED OR REPLACED AVOINICS. DO NOT REPORT ORIGINAL STANDARD FACTORY AVIONICS. FOR CONDITION, PLEASE ENTER (N) NEW, (A) AVERAGE, (P) POOR.  UNIT   ACQUISITION   COST   CONDITION   ASSESSOR   UNIT   ACQUISITION   COST    UNIT   ACQUISITION   COST   CONDITION   ASSESSOR   UNIT   ACQUISITION   CONDITION    ASSESSOR   UNIT   ACQUISITION   CONDITION   ASSESSOR   UNIT   ACQUISITION   CONDITION    UNIT   ACQUISITION   CONDITION   COST   CONDITION   CONDITION   CONDITION   CONDITION   CONDITION    AND	SERIAL NUMBER						PURCHA	ASE D	DATE				DATE MOVED TO THIS COUNTY			
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NEW CONDITION USE ONLY   USE ONLY   USE ONLY	AVIONICS	SU	IMMARY	': REF										RD FACTO	RY AVIONICS	
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AC	NAVCOM #2										RADAR					
LOCALIZER  DME DISTANCE MEASURING EQUIPMENT  COMPASS SYSTEM/HSI HORIZONTAL SITUATION INDICATOR  AUTOPILOT NUMBER OF AXES  FLIGHT DIRECTOR  HF TRANSCEIVERS HIGH FREQUENCY  OTHER NON-FACTORY AVIONICS  AUTOMATIC DIRECTION FINDER  AIR CONDITIONING  BOOTS  HF TRANSCEIVERS HIGH FREQUENCY  OTHER NON-FACTORY AVIONICS									LORAN							
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GPS IFR GLOBAL POSITIONING SYSTEM, INSTRUMENT FLIGHT RULES  HIGH FREQUENCY  OTHER NON-FACTORY AVIONICS										BOOTS						
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THIS DOCUMENT IS NOT SUBJECT TO PUBLIC INSPECTION



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BOE-577 (P2) REV. 05 (05-15)) SECTION 1: (continued)

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

AIRFRAME HOURS:		7								
ENGINE(S)	LEFT	RIGHT		FOR HELICOPTERS - HOURS SINCE MAJOR OVERHAUL:						
MAKE					ENGINE	MAIN ROTOR BLADES	MAIN ROTOR HEAD ASSEMBLY			
MODEL				_	MAST	MAST	TAIL ROTOR			
YEAR OF MANUFACTURE					TAIL DOTOD	TRANSMISSION TAIL ROTOR HUB	DRIVESHAFT			
HORSEPOWER HOURS SINCE NEW				TAIL ROTOR GEARBOX	ASSEMBLY	TAIL ROTOR BLADES				
HOURS SINCE MAJOR OVERHAUL					SERVOS	MISCELLANEOUS				
TIME BETWEEN OVERHAULS (TBO)				_						
HOURS SINCE MIDLIFE										
DATE OF MAJOR OVERHAUL										
DATE OF LANDING GEAR OVERHAUL										
ENGINE MAINTENANCE SERVINAME OF PROGRAM: FOR HOMEBUILT, KIT, OR EXPLINATION II: COMPLETE IF FIR	ERIMENTAL AIRCF		R EXACT DATE (	)F FIR	ST FLIGHT:	DATE:				
NAME AND ADDRESS OF OWNER				INE	LAST CALENI	JAN TEAN				
NAME			ADDRESS							
CITY				STATE	ZIP CODE	COUNTY				
IF AIRCRAFT WAS SOLD, ATTACH	A COMPLETE COPY	OF THE SAL	ES CONTRACT	•	•					
IF SOLD OR DONATED: DATE OF	SALE		SALE PRICE							
NEW OWNER NAME			\$ ADDRESS							
CITY				STATE	ZIP CODE	COUNTY				
IF: MOVED JUNKED	PARTED DESTI	ROYED /	ABANDONED							
DATE NEW LOCATION	ON (IF MOVED)					COUNTY	COUNTY			
EXPLANATION										
AIRCRAFT NOT HABITUALLY BASI	ED IN THIS COUNTY									
AIRPORT/FBO WHERE NORMALLY						HANGAR/TIE-DOV	VN NO.			
CITY			STATE	ZIP CODE	COUNTY	COUNTY				
CHECK DEACON AIDODAET IC OD	V. DEDAU	DC TOP ON F		L TDANIOIT TO:						
CHECK REASON AIRCRAFT IS OR	WAS IN THIS COUNT	Y: REPAI	RS FOR SALE	=	N TRANSIT TO: OTHER:					
ATTACH STATEMENT RI				OU FE	EL WOULD AS		YOUR AIRCRAFT.			
OWNERSHIP TYPE IS LLC, PLEASE ATTACH A LIST OF MEMBERS NAMES.  OWNERSHIP TYPE (☑)  Proprietorship  Detail of the state of California that I have examined this property										
Corporation statem is true, Cother control	ent, including accord , correct, and com led, or managed by	npanying sch plete and in	nedules, statemen cludes all prope	ts or ot erty red	ther attachmen quired to be r n this statemen	ts, and to the best of my eported which is owne t at 12:01 a.m. on Janua	y knowledge and belief it ed, claimed, possessed,			
SIGNATURE OF ASSESSEE OR AUTHOR	:IZED AGENT*					DATE				
NAME OF ASSESSEE OR AUTHORIZED	AGENT* (typed or printed)	)			-	TITLE				
NAME OF LEGAL ENTITY (other than DBA	l) (typed or printed)				I	FEDERAL EMPLOYER ID NUMBER				
PREPARER'S NAME AND ADDRESS (type	ed or printed)		TELEPHO	NE NUN	/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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