EF-577-R07-0518-21000923-1 BOE-577 (P1) REV. 07 (05-18)

### **AIRCRAFT PROPERTY STATEMENT**

Declaration of costs and other related property



# SHELLY SCOTT ASSESSOR-RECORDER-COUNTY CLERK

**BUSINESS DIVISION** PO Box C, Civic Center Branch San Rafael, CA 94913 PH (415) 473-7208

information as of 12:01 a.m., January 1, 20											
PLEASE NOTE: This form must be filed timely Assessor's office, regardless of the status of any Aircraft Exemption Claim. Penalties will apply it	y Historica	al									
NAME AND MAILING ADDRESS (Make necessary corrections to the printed name and		FOR ASSESSOR'S USE ONLY									
L											
SECTION I: MUST BE COMPLETED ANNUALLY											
1. FAA REGISTRATION NUMBER DAYTIME PHONE NUMBER AIRCRAFT LOCATION (AIRPORT, HANGAR OR TIE-DOWN NUMBER)  N											
MANUFACTURER ( )	MODEL					\	YEAR BUILT				
SERIAL NUMBER	PURCHAS	SE DATE	PURCHASE PRICE \$		ATE MOVE	D TO THIS CO	DUNTY				
FOR AIRCRAFT PREVIOUSLY REGISTERED OR ASSESSED IN ANOTHER CALIFORNIA COUNTY, INDICATE COUNTY NAME AND ASSESSMENT YEARS											
FIXED BASE OPERATOR NAME	AST MAJOF	R AIRFRAME OVERHAUL DATE: 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 STATEMEN											
INTERIOR NEW GOOD AVERAGE POOR EQUIPMENT LEASED, EXCHANGED, ADDED OR RETIRED  EXTERIOR NEW GOOD AVERAGE POOR YES NO IF YES, SEE INSTRUCTIONS AND ATTACH SCHEDI											
	ERAGE _	POOR		IES, SEE IIVS	RUCTIONS	ANDATIACE	- SCHEDULE.				
3. TYPE OF USAGE:  PERSONAL/PLEASURE   FLIGHT TRAINING   RENTA	и □ снав	RTER/TAXI	BUSINESS FRACT	TIONAL OWNE	RSHIP PRO	GRAM SH	HOW/MUSEUM				
IF YOU CHECKED CHARTER/TAXI, DO YOU USE THE	AIRCRAFT I	N СОММОN	CARRIAGE MORE THAN	50% OF THE T	IME? Y		10 VVIVIO CE OIVI				
NOTE: COMMON CARRIAGE DOES NOT INCLUDE FERRY FLIGHTS OR PART 91 OWNER FLIGHTS.  4. AVIONICS SUMMARY: REPORT ONLY ADDED OR REPLACED AVIONICS. DO NOT REPORT ORIGINAL STANDARD FACTORY AVIONICS.  FOR CONDITION, PLEASE ENTER (N) NEW, (A) AVERAGE, (P) POOR.											
UNIT ACQUISITION COST DATE NEW	CONDITION	ASSESSOR USE ONLY	UNIT	ACQUISITION DATE	COST NEW	CONDITION	ASSESSOR USE ONLY				
RVSM REDUCED VERTICAL SEPARATION MINIMUM MONITOR			RADAR ALTIMETER								
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			LORAN								

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

ADF AUTOMATIC DIRECTION FINDER

AIR CONDITIONING

HF TRANSCEIVERS

OTHER NON-FACTORY

BOOTS

AVIONICS

DME DISTANCE MEASURING EQUIPMENT



GLIDESLOPE

LOCALIZER

**AUTOPILOT** 

COMPASS SYSTEM/HSI HORIZONTAL SITUATION INDICATOR

GPS IFR GLOBAL POSITIONING SYSTEM, INSTRUMENT FLIGHT RULES

NUMBER OF AXIS FLIGHT DIRECTOR

BOE-577 (P2) REV. 07 (05-18) **SECTION I: (continued)** 

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

MAKE MODEL YEAR OF MANUFACTURE HOURS SINCE MAJOR OVERHAUL: HOURS SINCE MAJOR OVERHAUL TIME BETWEEN OVERHAULS (TIBD) HOURS SINCE MAJOR OVERHAUL DATE OF MAJOR OVERHAUL DATE OF MAJOR OVERHAUL ENGINE MAIN ROTOR HAUR SINCE MAJOR OVERHAUL DATE OF LANDING GEAR OVERHAUL ENGINE MAINTENANCE SERVICE PROGRAM: SERVICE PROGRAM: SECTION II: COMPLETE IF FIRST TIME FILING OR IF ANY CHANGES WITHIN THE LAST CALENDAR YEAR NAME AND ADDRESS OF OWNER IF DIFFERENT FROM FAA REGISTERED OWNER NAME OF PROGRAM: SECTION II: COMPLETE OF SALE SALE PRICE SALE PRICE SALE PRICE SALE PRICE SALE PRICE SECTION BONATED: DATE OF ADDRESS CITY STATE ZIP CODE COUNTY  FAIRCRAFT WAS SOLD, ATTACH A COMPLETE COPY OF THE SALES CONTRACT  IF: MOVED JUNKED PARTED DESTROYED ABANDONED  DATE NEW OWNER NAME ADDRESS CITY STATE ZIP CODE COUNTY  HANGARTIE-DOWN NO. CITY  BRACKAFT NOT HABITUALLY BASED IN THIS COUNTY  AIRCRAFT NOT HABITUALLY BASED IN THIS COUNTY  AIRCRAFT NOT HABITUALLY BASED IN THIS COUNTY  AIRCRAFT ODE COUNTY  STATE ZIP CODE COUNTY  HANGARTIE-DOWN NO.	5.	ENGINE(S)	SINGLE	LEFT	-	RIGHT	-	6. TOTAL AIRFRAME HOURS:					
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AIRPORT/FBO WHERE NORMALLY KEPT    STATE   ZIP CODE   COUNTY	EX	PLANATION											
AIRPORT/FBO WHERE NORMALLY KEPT    STATE   ZIP CODE   COUNTY													
CHECK REASON AIRCRAFT IS OR WAS IN THIS COUNTY: REPAIRS FOR SALE IN TRANSIT TO:  OTHER:  ATTACH STATEMENT REGARDING ANY ADDITIONAL INFORMATION YOU FEEL WOULD ASSIST US IN VALUING YOUR AIRCRAFT. IF OWNERSHIP TYPE IS LLC, PLEASE ATTACH A LIST OF MEMBERS NAMES.  OWNERSHIP TYPE (2)  Proprietorship Declaration By Assesse  Note: The following declaration must be completed and signed. If you do not do so, it may result in penalties.  I certify (or declare) under penalty of perjury under the laws of the State of California that I have examined this property 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, or managed by the person named as the assessee in this statement at 12:01 a.m. on January 1, 20  SIGNATURE OF ASSESSEE OR AUTHORIZED AGENT*  DATE  NAME OF LEGAL ENTITY (other than DBA) (typed or printed)  TILE  PREPARER'S NAME AND ADDRESS (typed or printed)  TILE  TELEPHONE NUMBER  TITLE													
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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 a member where there is no 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.



EF-577-R07-0518-21000923