EF-577-R07-0518-23000170-1 BOE-577 (P1) REV. 07 (05-18)

AIRCRAFT PROPERTY STATEMENT



501 Low Gap Road, Room 1020

Katrina Bartolomie

Ukiah, CA 95482

MENDOCINO COUNTY ASSESSOR

Telephone: (707) 234-6800 Fax: (707) 463-6597

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

FILE RETURN BY: _____

PLEASE NOTE: This for Assessor's office, regard Aircraft Exemption Claim	less of the s	tatus of a	ny Historic	al							
NAME AND MAILING (Make necessary corr		٦									
L											
SECTION I: MUST BE COMP	LETED ANNI	JALLY			L						
1. FAA REGISTRATION NUMBER	R	DAYTIME PH	HONE NUMBE	ER AIRCR	AFT LOCATION (A	AIRPORT, HANGAR	T, HANGAR OR TIE-DOWN NUMBER)				
MANUFACTURER	l.	, ,	MODEL					,	YEAR BUILT		
SERIAL NUMBER			PURCHA	ASE DATE	PURCHASE PRI	ICE	DATE MOVE	ED TO THIS CO	YTNUC		
FOR AIRCRAFT PREVIOUSLY RE	EGISTERED OF	RASSESSED	IN ANOTHER	R CALIFORN	\$ IA COUNTY, INDIC	CATE COUNTY NAM	 E AND ASSES	SMENT YEAR	S		
FIXED BASE OPERATOR NAME				LAST MAJOR	R AIRFRAME OVE	RHAUL DATE:	COST:				
2. AIRCRAFT CONDITION:	🗆										
WHEN PURCHASED NE			VERAGE [POOR	DAMAGE HIST	_					
CURRENT NE		=	VERAGE [POOR		YES NO IF YES, SEE INSTRUCTIONS AND ATTACH STATEMENT					
NTERIOR NE		VERAGE [POOR	EQUIPMENT LEASED, EXCHANGED, ADDED OR RETIRED YES NO IF YES, SEE INSTRUCTIONS AND ATTACH SCHEDULE							
EXTERIOR NE	W GOC	DD [A	VERAGE _	POOR			INSTRUCTION	3 AND AT TAC	T SCHLDOLL.		
3. TYPE OF USAGE: PERSONAL/PLEASUREF	FLIGHT TRAINI	NG REN	TAL CHA	RTER/TAXI	BUSINESS	FRACTIONAL O	WNERSHIP PR	OGRAM SI	HOW/MUSEUM		
	NOTE: COMMO	ON CARRIAG	GE DOES NOT	Γ INCLUDE FI	ERRY FLIGHTS O	R PART 91 OWNER	R FLIGHTS.	YES NO			
4. AVIONICS SUMMA	ARY: REPORT	FOR COND		E ENTER (N)	S. DO NOT REPO) NEW, (A) AVERA 			RY AVIONICS.	1		
UNIT	DATE	COST NEW	CONDITION	ASSESSOR USE ONLY	UNIT	ACQUISIT DATE		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 INDICATO						
TCAS TRAFFIC ALERT COLLISION AVOIDANCE SYSTEM					VLF VERY LOW FREQUENCY						
NAVCOM #1					PHONE						
NAVCOM #2					RADAR	RADAR					
TRANSPONDER A C					LORAN						
GLIDESLOPE					ADF AUTOMATIC DIRECTION FIN	NDER					
LOCALIZER					DME DISTANCE MEASURING EQ						
COMPASS SYSTEM/HSI HORIZONTAL SITUATION INDICATOR					AIR CONDITIONING	G					
AUTOPILOT NUMBER OF AXIS					BOOTS						
FLIGHT DIRECTOR					HF TRANSCEIVERS HIGH FREQUENCY						
GPS IFR GLOBAL POSITIONING SYSTEM, INSTRUMENT FLIGHT RULES					OTHER NON-FACT AVIONICS						
	THE DEAL A	DATIONED	V ACCECCE	E ON DAGE	O MILIOT DE OC	AMDIETED AND	CICNED				

THE DECLARATION BY ASSESSEE ON PAGE 2 MUST BE COMPLETED AND SIGNED



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

PLEASE ENTER INFORMATION AS OF JANUARY 1 OF THIS YEAR.

5.	ENGINE(S)	SINGLE	LEF1	Г	RIGHT		6. TOTAL AIRFRAME HOURS:				
	MAKE						0. 101	AL A	IKFKAWIE HOU	NJ	
	MODEL										
	YEAR OF MANUFACTURE						FOR U	FLICOR	OPTERS - HOURS SINCE MAJOR OVERHA		
	HORSEPOWER						ENGINE	ELICOF	MAIN ROTOR	MAIN ROTOR	
	HOURS SINCE NEW						2.1012		BLADES	HEAD ASSEMBLY	
	HOURS SINCE MAJOR OVERHAUL						MAST		MAST TRANSMISSION	TAIL ROTOR DRIVESHAFT	
	TIME BETWEEN OVERHAULS (TBO)						TAIL ROTOR		TAIL ROTOR HUB	TAIL ROTOR	
	HOURS SINCE MIDLIFE						GEARBOX		ASSEMBLY	BLADES	
	DATE OF MAJOR OVERHAUL						SERVOS		MISCELLANEOUS		
	DATE OF LANDING GEAR OVERHAUL										
NA	ENGINE MAINTENANCE SERVICE PROGRAM: YES NO NAME OF PROGRAM: ENROLLMENT DATE: FOR HOMEBUILT, KIT, OR EXPERIMENTAL AIRCRAFT, ENTER EXACT DATE OF FIRST FLIGHT:										
_	SECTION II: COMPLETE IF FIRST TIME FILING OR IF ANY CHANGES WITHIN THE LAST CALENDAR YEAR										
	ME AND ADDRESS OF OWNER IF						AST CALLIN	IDAN I	LAN		
NA	ME			ADDRESS	S						
CIT	7/					CTATE	ZIP CODE		COLUTY		
CH	1					SIAIE	ZIP CODE		COUNTY		
	UPCDAFT WAS SOLD ATTACH A	OMPLETE CORV C	THE SALE	S CONTR	ACT						
	IF AIRCRAFT WAS SOLD, ATTACH A COMPLETE COPY OF THE SALES CONTRACT IF SOLD OR DONATED: DATE OF SALE SALE PRICE										
				\$							
NE	W OWNER NAME			ADDRES	S						
CIT	Y					STATE	ZIP CODE		COUNTY		
_											
IF:		RTED DESTR	OYED/	ABANDON	ED						
DA	TE NEW LOCATION	(IF MOVED)							COUNTY		
FX	PI ANATION										
_,,,	EXPLANATION										
AIF	CRAFT NOT HABITUALLY BASED	IN THIS COUNTY									
AIF	PORT/FBO WHERE NORMALLY KE	PT							HANGAR/TIE-DOWN	I NO.	
OITV						OTATE	ATE ZIP CODE COUNTY				
CITY						SIAIE	ZIP CODE		COUNTY		
СН	ECK REASON AIRCRAFT IS OR WA	AS IN THIS COUNTY	: REPAI	RS FO	R SALE		L I TRANSIT TO:	•			
						=		•			
_	ATTACH STATEMENT REG	ADDING ANV AD	DITIONALI	INIEODMA	ATION VO		THER:	CCICT	THE INLVALUING V	OUD AIDCDAET	
		IF OWNERSHIP T								OUR AIRCRAIT.	
0	WNERSHIP TYPE (☑)			DF	CI ARA	TION	BY ASSES	SFF			
Pı	oprietorship	: The following d	eclaration			_		_	not do so, it may	result in penalties.	
Pa	artnership	(1	- (4) - 0(-4-	- 6 0 - 10	6		
C	Corporation Corporation 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										
Other is true, correct, and complete and includes all property required to be reported which is owned, claimed, possessed, control									possessed, controlled,		
016	NATURE OF ADDEDOES OF AUTHORIZE		ne person n	amed as	the asses	ssee ir	this stateme		2:01 a.m. on Janua	ry 1, 20	
SIGNATURE OF ASSESSEE OR AUTHORIZED AGENT*							DATE				
NAME OF ASSESSEE OR AUTHORIZED AGENT* (typed or printed)								TITLE			
NAME OF LEGAL ENTITY (other than DBA) (typed or printed)							FEDERAL EMPLOYER ID NUMBER			ER	
PR	EPARER'S NAME AND ADDRESS (typed o	or printed)			TELEPHO!	NE NUM	BER	TITLE			
E-N	MAIL ADDRESS				11	,		-			

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.



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