EF-577-R07-0518-24000429-1 BOE-577 (P1) REV. 07 (05-18)

FILE RETURN BY:

AIRCRAFT PROPERTY STATEMENT

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



MERCED COUNTY MATT H. MAY, ASSESSOR

2222 M STREET
MERCED, CA 95340
TELEPHONE (209) 385-7631
FAX (209) 725-3956
www.co.merced.ca.us\assessor

PLEASE NOTE: This form Assessor's office, regardle Aircraft Exemption Claim.	ess of the s	tatus of any	, Historic	al							
NAME AND MAILING (Make necessary corre	ADDRESS				٦	ı	FOR AS	SSESSOR'S	USE ONLY		
L CECTION IS MUST BE COMPI	ETED ANNU	IIAI I V			_						
1. FAA REGISTRATION NUMBER	LETED ANN	DAYTIME PHO	NE NUMBE	R AIRCR	AFT LOCATION (AIR	PORT HANG	AR OR	TIF-DOWN	NUMBER)		
N ()				7	200/11/01/ (/	That one, in the second between the best translets					
MANUFACTURER			MODEL			YEA				YEAR BUILT	
SERIAL NUMBER			PURCHA	SE DATE	PURCHASE PRICE			ATE MOVE	D TO THIS CO	OUNTY	
FOR AIRORAFT PREMISHOUNT	OLOTEDED OF	D 4005005D II	LI ANOTHE	OAL IEODAU	\$						
FOR AIRCRAFT PREVIOUSLY RE	GISTERED OF	R ASSESSED II	NANOTHER	R CALIFORNI	A COUNTY, INDICAT	IE COUNTY N	AME AI	ND ASSESS	SMENT YEAR	S	
FIXED BASE OPERATOR NAME				LAST MAJOF	R AIRFRAME OVERHAUL DATE:			COST:			
2. AIRCRAFT CONDITION:											
WHEN PURCHASED NEV	v Goo	DD AVE	RAGE	POOR	DAMAGE HISTO	RY					
CURRENT NEW GOOD AVE		DD AVE	RAGE	POOR	YES N	NO IF YES, SEE INSTRUCTIONS AND ATTACH STATEMENT					
INTERIOR NEW GOOD AVE		RAGE	POOR	EQUIPMENT LEASED, EXCHANGED, ADDED OR RETIRED							
EXTERIOR NEW GOOD AVE			RAGE	GE POOR YES NO IF YES, SEE INSTRUCTIONS A				AND ATTAC	H SCHEDULE.		
3. TYPE OF USAGE:											
PERSONAL/PLEASURE F	LIGHT TRAINI	ING RENTA	L CHA	RTER/TAXI	BUSINESS	FRACTIONAL	OWNE	RSHIP PRO	GRAM SI	HOW/MUSEUM	
IF YOU CHECKED CHART					CARRIAGE MORE T ERRY FLIGHTS OR I				resno		
		ONLY ADDED (OR REPLAC	ED AVIONIC	S. DO NOT REPORT	ORIGINAL ST			RY AVIONICS.		
UNIT	ACQUISITION DATE	UISITION COST		ASSESSOR USE ONLY	NEW, (A) AVERAGE, (P) POOR. UNIT ACQUIS				CONDITION	NDITION ASSESSOR USE ONLY	
RVSM REDUCED VERTICAL SEPARATION MINIMUM	DAIL	NEW		OOL ONE!	RADAR ALTIMETER			NEW		OOL ONE!	
MONITOR TAWS					ENCODER						
TERRAIN AWARENESS WARNING SYSTEM 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 FINDE	R					
LOCALIZER					DME DISTANCE MEASURING EQUIP	MENT					
COMPASS SYSTEM/HSI HORIZONTAL SITUATION INDICATOR					AIR CONDITIONING						
AUTOPILOT NUMBER OF AXIS					BOOTS						
FLIGHT DIRECTOR					HF TRANSCEIVERS						
GPS IFR GLOBAL POSITIONING SYSTEM, INSTRUMENT FLIGHT RULES					OTHER NON-FACTOR	RY					

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



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	RIC	SHT	6. TOTAL AIRFRAME HOURS:				
	MAKE					6. IOIA	L AIRFRAINE HOU	K3.		
	MODEL									
	YEAR OF MANUFACTURE					EOD HEI	ICOPTERS - HOURS SING	E MA IOD OVERHALII .		
	HORSEPOWER					ENGINE	MAIN ROTOR	MAIN ROTOR		
	HOURS SINCE NEW					ENONE	BLADES	HEAD ASSEMBLY		
	HOURS SINCE MAJOR OVERHAUL					MAST	MAST TRANSMISSION	TAIL ROTOR DRIVESHAFT		
	TIME BETWEEN OVERHAULS (TBO) HOURS SINCE MIDLIFE					TAIL ROTOR GEARBOX	TAIL ROTOR HUB ASSEMBLY	TAIL ROTOR BLADES		
	DATE OF MAJOR OVERHAUL					SERVOS	MISCELLANEOUS	BLADES		
	DATE OF LANDING GEAR OVERHAUL					GERVOO	WIIOGELEANEOGO			
			VEC NO							
NA	GINE MAINTENANCE SERVICE ME OF PROGRAM:						DATE:			
FO	R HOMEBUILT, KIT, OR EXPER	IMENTAL AIRCR	AFT, ENTER	EXACT DATI	OF FIR	ST FLIGHT: _				
	CTION II: COMPLETE IF FIRST ME AND ADDRESS OF OWNER IF I				IIN THE	LAST CALEND	AR YEAR			
NA		DIFFERENT FROM		DDRESS						
CIT	Υ				STATE	ZIP CODE	COUNTY			
_	JDODAFT WAS SOLD ATTACK A	CMPLETE CORV.	NE THE CALEO	CONTRACT						
	AIRCRAFT WAS SOLD, ATTACH A CONTROL OF SA			SALE PRICE						
`	DATE OF OF	LL.		SALE PRICE \$						
NE	W OWNER NAME		A	ADDRESS						
CIT	Y				STATE	ZIP CODE	COUNTY			
<u></u>										
IF:	MOVED JUNKED PA		OYED AE	BANDONED						
DA	TE NEW LOCATION	(IF MOVED)					COUNTY			
EX	PLANATION									
	CRAFT NOT HABITUALLY BASED									
AIF	RPORT/FBO WHERE NORMALLY KE	PT					HANGAR/TIE-DOWN	NO.		
CIT	Υ				STATE	ZIP CODE	COUNTY			
CH	ECK REASON AIRCRAFT IS OR WA	S IN THIS COUNTY	: REPAIRS	S FOR SAL	.E 🗆 I	N TRANSIT TO:				
					=	OTHER:				
_	ATTACH STATEMENT REG	ARDING ANY AD	DITIONAL IN	FORMATION			SIST LIS IN VALUING Y	OUR AIRCRAFT		
_		IF OWNERSHIP						OUNTAINCHAI 1.		
0	WNERSHIP TYPE (☑)			DECLA	RATION	BY ASSESSE	ΞE			
Pı	oprietorship Note	: The following d	leclaration m	ust be comp	oleted an	d signed. If you	u do not do so, it may ı	esult in penalties.		
	Partnership Composition I certify (or declare) under penalty of perjury under the laws of the State of California that I have examined this property									
	statement	,					s, and to the best of my k			
_	ther is true, co.						which is owned, claimed,			
SIG	SNATURE OF ASSESSEE OR AUTHORIZE		ne person nai	nea as the a	ssessee i		at 12:01 a.m. on Janua ATE	ry 1, 20		
SIGNATURE OF AGGESTEE OR AUTHORIZED AGENT										
NA	ME OF ASSESSEE OR AUTHORIZED AGE	ENT* (typed or printed)				ТІ	TLE			
NA	NAME OF LEGAL ENTITY (other than DBA) (typed or printed)						FEDERAL EMPLOYER ID NUMBER			
PR	EPARER'S NAME AND ADDRESS (typed o	or printed)		TELE	PHONE NUI	MBER TI	TLE			
_				(
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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