EF-577-R07-0518-24000301-1 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_



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

FILE RETURN BY:											
PLEASE NOTE: This form Assessor's office, regardle Aircraft Exemption Claim.	ess of the s	tatus of	any Histor	ical							
NAME AND MAILING (Make necessary corre	nddress)		F	FOR ASSESSOR'S USE ONLY							
r i					コ						
L					_						
SECTION I: MUST BE COMPL	ETED ANN	UALLY									
1. FAA REGISTRATION NUMBER N		DAYTIME F	PHONE NUME	BER A	IRCRAFT LOCATION (AIRPORT, HANGA	R OR	TIE-DOWN	NUMBER)		
MANUFACTURER		1 /	MODEL	-					,	YEAR BUILT	
SERIAL NUMBER			PURCH	IASE DAT	E PURCHASE PR	RICE	D	DATE MOVED TO THIS COUNTY			
	0,07555				\$	0.4TE 0.01 N.T.(.).4					
FOR AIRCRAFT PREVIOUSLY RE	GISTERED OF	RASSESSE	D IN ANOTH	ER CALIF	ORNIA COUNTY, INDI	CATE COUNTY NA	ME AN	ND ASSESS	SMENT YEAR	S	
FIXED BASE OPERATOR NAME				LAST	MAJOR AIRFRAME OVI	R AIRFRAME OVERHAUL DATE:			COST:		
2. AIRCRAFT CONDITION:											
WHEN PURCHASED NEV	V GOO	DD .	AVERAGE	PO0	DAMAGE HIS	TORY					
CURRENT NEW GOOD AVERAGE POOR YES NO IF YES, SEE INSTRUCTIONS AND ATTACH STATE								H STATEMENT.			
INTERIOR NEW GOOD AVERAGE POOR EQUIPMENT LEASED, EXCI								-			
EXTERIOR NEV	V GOC	DD .	AVERAGE	PO0	DR YES L	NO IF YES, SEL	E INST	RUCTIONS	S AND ATTACH	H SCHEDULE.	
3. TYPE OF USAGE:						_					
	LIGHT TRAINI			ARTER/1		FRACTIONAL C				HOW/MUSEUM	
IF YOU CHECKED CHART					IMON CARRIAGE MOI DE FERRY FLIGHTS (YES NO		
4. AVIONICS SUMMA	RY: REPORT (ONLY ADDE	ED OR REPLA DITION, PLEA	CED AVI	ONICS. DO NOT REPO ER (N) NEW, (A) AVERA	ORT ORIGINAL STA AGE, (P) POOR.	ANDAF	RD FACTOR	RY AVIONICS.		
UNIT	ACQUISITION DATE	COST NEW	CONDITION	ASSES USE O		ACQUIS DAT		COST NEW	CONDITION	ASSESSOR USE ONLY	
RVSM REDUCED VERTICAL SEPARATION MINIMUM MONITOR					RADAR ALTIMETE	ĒR					
TAWS TERRAIN AWARENESS WARNING SYSTEM					ENCODER						
EFIS ELECTRONIC FLIGHT INSTRUMENT SYSTEM					RMI RADIO MAGNETIC INDICA	TOR					
TCAS TRAFFIC ALERT COLLISION AVOIDANCE SYSTEM					VLF VERY LOW FREQUENCY						
NAVCOM #1					PHONE	PHONE					
NAVCOM #2					RADAR						
TRANSPONDER A C					LORAN						
GLIDESLOPE					ADF AUTOMATIC DIRECTION F	FINDER					
LOCALIZER					DME DISTANCE MEASURING E	DME DISTANCE MEASURING EQUIPMENT					
COMPASS SYSTEM/HSI HORIZONTAL SITUATION INDICATOR					AIR CONDITIONIN	NG .					
AUTOPILOT NUMBER OF AXIS	IS BOOTS										
FLIGHT DIRECTOR				HF TRANSCEIVE	RS						
GPS IFR GLOBAL POSITIONING SYSTEM, INSTRUMENT FLIGHT RULES					OTHER NON-FAC AVIONICS	CTORY					

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	Г Б	RIGHT						
	MAKE						6. IOIA	L AIRFRAME HOU	KS:		
	MODEL										
	YEAR OF MANUFACTURE										
	HORSEPOWER							ICOPTERS - HOURS SINC			
	HOURS SINCE NEW						ENGINE	MAIN ROTOR BLADES	MAIN ROTOR 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	GINE MAINTENANCE SERVICE ME OF PROGRAM: R HOMEBUILT, KIT, OR EXPER				TE OE			DATE:			
_								AD VEAD	·		
	CTION II: COMPLETE IF FIRST ME AND ADDRESS OF OWNER IF I					HEL	AST CALEND	AR YEAR			
	ME			ADDRESS							
CIT	Y				S	TATE	ZIP CODE	COUNTY			
IF A	LIRCRAFT WAS SOLD, ATTACH A C	OMPLETE COPY C	F THE SALE	S CONTRACT	т						
IF S	SOLD OR DONATED: DATE OF SA	ALE		SALE PRICE							
NIE	W OWNER NAME			\$ ADDRESS							
INE	W OWNER NAME			ADDRESS							
CIT	Y				S	TATE	ZIP CODE	COUNTY			
IF:	MOVED JUNKED PA	RTED DESTR	OYED .	ABANDONED							
DA			,					COUNTY			
		(
EX	PLANATION										
AIF	CRAFT NOT HABITUALLY BASED	IN THIS COUNTY									
	PORT/FBO WHERE NORMALLY KE							HANGAR/TIE-DOWN	NO.		
CIT	Y				S	TATE	ZIP CODE	COUNTY			
CHECK REASON AIRCRAFT IS OR WAS IN THIS COUNTY: REPAIRS FOR SALE IN TRANSIT TO:											
OTHER:											
	ATTACH STATEMENT REG								OUR AIRCRAFT.		
_		IF OWNERSHIP 1	TPE IS LL	-							
	WNERSHIP TYPE (☑)	. The following d	coloration			_	BY ASSESSE	EE u do not do so, it may ι	recult in penaltics		
	roprietorship	. The following a	eciaration	must be con	iibiete	u and	i signed. Ii yot	a do not do so, it may i	esuit in penaities.		
	corporation I certify (or declare) under penalty of perjury under the laws of the State of California that I have examined this property										
other 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,											
016	NATURE OF ACCEPOSE OF AUTHORIZE		ne person n	amed as the	assess	see in		at 12:01 a.m. on Janua	ry 1, 20		
	SNATURE OF ASSESSEE OR AUTHORIZE	D AGENT						ATE			
NA	NAME OF ASSESSEE OR AUTHORIZED AGENT* (typed or printed)							TITLE			
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)		TEL	LEPHONI	E NUM	BER 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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