EF-577-R06-0516-25000607-1 BOE-577 (P1) REV. 06 (05-16)

## **AIRCRAFT PROPERTY STATEMENT**

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



# **Cheri Budmark Modoc County Assessor**

204 Sout Court Street, Suite 106 Alturas, CA 96101 Phone: (530) 233-6218 Fax: (530) 233-6237 assessor@co.modoc.ca.us

FILE RETURN BY:	 		
PLEASE NOTE: Assessor's office		,	

Assessor's office, rega Historical Aircraft Exemp if not filed.	tion Claim			,					
NAME AND MAILING A (Make necessary corre □		inted name an	d mailing add	dress)	٦	FOR A	ASSESSOR'S	SUSE ONLY	
L SECTION I: MUST BE COMP	LETED ANNU	JALLY							
FAA REGISTRATION NUMBER		DAYTIME PHO	ONE NUMBE	R AIRCR	AFT LOCATION (AIRPOR	T, HANGAR OF	R TIE-DOWN	NUMBER)	
MANUFACTURER		( )	MODEL						/EAR BUILT
SERIAL NUMBER			PURCHA	ASE DATE	PURCHASE PRICE		DATE MOVE	D TO THIS CO	DUNTY
FOR AIRCRAFT PREVIOUSLY RE	GISTERED OF	RASSESSED	IN ANOTHER	R CALIFORNI	À COUNTY, INDICATE CO	OUNTY NAME	AND ASSESS	SMENT YEAR:	3
FIXED BASE OPERATOR NAME				LAST MAJOF	R AIRFRAME OVERHAUL		COST: \$		
AIRCRAFT CONDITION: WHEN PURCHASED NEV CURRENT NEV INTERIOR NEV EXTERIOR NEV TYPE OF USAGE: PERSONAL/PLEASURE F	V GOOV GOO	DD AV DD AV DD AV DD AV			BUSINESS FRAC	), EXCHANG YES, SEE INS	ED, ADDEI	O OR RETIR	ED H SCHEDULE.
	NOTE: COMMO	ON CARRIAGE ONLY ADDED	OR REPLAC	FINCLUDE FI	ERRY FLIGHTS OR PART S. DO NOT REPORT ORI	91 OWNER FL GINAL STANDA	IGHTS.		
UNIT	ACQUISITION	COST	CONDITION	ASSESSOR	) NEW, (A) AVERAGE, (P)  UNIT	ACQUISITIO		CONDITION	ASSESSOR
RVSM REDUCED VERTICAL SEPARATION MINIMUM MONITOR	DATE	NEW		USE ONLY	RADAR ALTIMETER	DATE	NEW		USE ONLY
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 A C					LORAN				
GLIDESLOPE					ADF AUTOMATIC DIRECTION FINDER				
LOCALIZER					DME DISTANCE MEASURING EQUIPMENT				
COMPASS SYSTEM/HSI HORIZONTAL SITUATION INDICATOR					AIR CONDITIONING				
AUTOPILOT NUMBER OF AXES					BOOTS				
FLIGHT DIRECTOR					HF TRANSCEIVERS				

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

OTHER NON-FACTORY AVIONICS



GPS IFR GLOBAL POSITIONING SYSTEM, INSTRUMENT FLIGHT RULES

EF-577-R06-0516-25000607-2

BOE-577 (P2) REV. 06 (05-16)) SECTION 1: (continued)

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

ENGINE(S) SINGLE LEFT RIGHT  WAS MODEL  WAS MODEL  WAS ANALYSCURE  WAS THANK BOTOR MANDER MAN	AIRFRAME HOURS:		1						
MODIE   MASS NECE NEW   MASS STATE   ZIP CODE   COUNTY		SINGLE	LEFT	RIGHT		FOR HELIC	COPTERS - HOURS SINC	E MAJOR OVERHAUL:	
MAST   TRANSMISSION   TAIL ROTOR   TAIL RO	MAKE					ENGINE			
TRANSMISSION DRIVENHAT HOURS SINCE MEW HOURS SINCE MEMORY HOURS SINCE M	MODEL					MAST			
HOURS SINCE NEW HOURS SINCE MADE AND ADDRESS AND SERVICE PROGRAM: SERVOR MISCELLARGOUS HOURS SINCE MADE AND ADDRESS AND ADDRES	YEAR OF MANUFACTURE					WAGT	-		
HOURS SINCE NEW HOURS OVERHAUL (S (180)  HOURS SINCE MIDLE   SERVICE PROGRAM:   YES   NO    NAME OF PROGRAM.   SERVICE PROGRAM:   YES   NO    NAME OF RESSESSES OR AUTHORIZED ABOND IN THE FALLS CALENDAR YEAR    NAME OF RESSESSES OR AUTHORIZED ABOND IN THIS COUNTY   STATE   ZIP CODE   COUNTY    NAME OF RESSESSES OR AUTHORIZED ABOND IN THIS COUNTY   STATE   ZIP CODE   COUNTY    NOVERSHIP TYPE (20)   NOVERSHIP TYPE IS LIC., PLEASE ATTACH ALIST OF MEMBERS NAMES.    DOWNERSHIP TYPE (20)   NOVERSHIP TYPE IS LIC., PLEASE ATTACH ALIST OF MEMBERS NAMES.    NOTE: The following declaration must be completed and signed, if you do not do so, it may result in penalties.    LONGER OF RESSESSES OR AUTHORIZED AGENT (mysee or printed)   STATE   STATE   STATE   STATE   STATE   TO NOT A BANDON TO SERVE THE MEMBERS NAMES.    DOWNERSHIP TYPE (20)   NOVERSHIP TYPE IS LIC., PLEASE ATTACH ALIST OF MEMBERS NAMES.    DOWNERSHIP TYPE (20)   NOVERSHIP TYPE IS LIC., PLEASE ATTACH ALIST OF MEMBERS NAMES.    DOWNERSHIP TYPE (20)   NOVERSHIP TYPE IS LIC., PLEASE ATTACH ALIST OF MEMBERS NAMES.    DOWNERSHIP TYPE (20)   NOVERSHIP TYPE IS LIC., PLEASE ATTACH ALIST OF MEMBERS NAMES.    DOWNERSHIP TYPE (20)   NOVERSHIP TYPE IS LIC., PLEASE ATTACH ALIST OF MEMBERS NAMES.    DOWNERSHIP TYPE (20)   NOVERSHIP TYPE IS LIC., PLEASE ATTACH ALIST OF MEMBERS NAMES.    DOWNERSHIP TYPE (20)   NOVERSHIP TYPE IS LIC., PLEASE ATTACH ALIST OF MEMBERS NAMES.    DOWNERSHIP TYPE	HORSEPOWER								
HOURS SINCE MAJOR OVERHAUL  TIME RETIVERS OPERHAULS (TIO)  INDURS SINCE MIDLE  DATE OF ANDRO GERROUGHAUL  ENGINE MAJOR OVERHAUL  ENGINE MAJOR OVER VERNE  ENGINE MAJOR OVER OVERHAUL  ENGINE MAJOR OVER VERNE  ENGINE MAJOR OVER OVERHAUL  ENGINE MAJOR OVER OVER OVER OVER OVER OVER OVER OV	HOURS SINCE NEW							BENDEO	
DATE OF MAJOR OVERHAUL  DATE OF MAJOR OF GAR OVERHAUL  ENGINE MAJOR OVER OVER OVER OVER OVER OVER OVER OV	HOURS SINCE MAJOR OVERHAUL								
DATE OF MAJOR OVERHAUL  DATE OF LANDING GEAR OVERHAUL  DATE OF LANDING GEAR OVERHAUL  DATE OF LANDING GEAR OVERHAUL  SECTION IT. COMPLETE IF FRST TIME FILING OR IF ANY CHANGES WITHIN THE LAST CALENDAR YEAR  NAME AND ADDRESS OF OWNER IF DIFFERENT FROM FAA REGISTERED OWNER  ADDRESS  CITY  FAIRCRAFT WAS SOLD, ATTACH A COMPLETE COPY OF THE SALES CONTRACT  FOOD OR DONATED:  DATE OF SALE  STATE ZIP CODE  COUNTY  FR. MOVED JUNKED PARTED DESTROYED ABANDONED  DATE  NEW LOCATION (IF MOVED)  ADDRESS  CITY  STATE ZIP CODE  COUNTY  EXPLANATION  ARRCRAFT NOT HABITUALLY BASED IN THIS COUNTY  AIRPORT/FBO WHERE NORMALLY KEPT  CITY  CHECK REASON AIRCRAFT IS OR WAS IN THIS COUNTY:  REPAIRS FOR SALE  ATTACH STATEMENT REGARDING ANY ADDITIONAL INFORMATION YOU FEEL WOULD ASSIST US IN VALUING YOUR AIRCRAFT.  IF OWNERSHIP TYPE (2)  PROPHERSHIP TYPE (2)  PROPHERSHIP TYPE (2)  PROPHERSHIP TYPE (3)  PROPHERSHIP TYPE (3)  PROPHERSHIP TYPE (3)  PROPHERSHIP TYPE (3)  PROPHERSHIP INFORMATION DESCRIPED UNDER PROPHER OF MAJOR OF PROPHER OF PROPHERS OF HEAD STATE WOULD ASSIST US IN VALUING YOUR AIRCRAFT.  IF OWNERSHIP TYPE (3)  PROPHERSHIP	TIME BETWEEN OVERHAULS (TBO	0)							
DATE OF LANDING GEAR OVERHAUL  ENGINE MAINTENANCE SERVICE PROGRAM: YES NO  ENROLLMENT DATE:  ENGILMENT DATE:  ENGREMENT AND RESPERIMENTAL AIRCRAFT. ENTER EXACT DATE OF FIRST FLIGHT:  SECTION IL COMPLETE IF FIRST TIME FILLION OR IF ANY CHANGES WITHIN THE LAST CALENDAR YEAR  MAME AND ADDRESS OF OWNER IT DIFFERENT FROM FAA REGISTERED OWNER.  ADDRESS  CITY STATE   ZIP CODE COUNTY  FAIRCRAFT WAS SOLD, ATTACH A COMPLETE COPY OF THE SALES CONTRACT  FOUND ON DONATED:  DATE OF SALE SALE PRICE  NEW OWNER NAME  ADDRESS  CITY STATE   ZIP CODE COUNTY  FIF. MOVED JUNKED PARTED DESTROYED ABANDONED  DATE NEW LOCATION (IF MOVED)  COUNTY  EXPLANATION  AIRCRAFT NOT HABITUALLY BASED IN THIS 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. FOWNERSHIP TYPE (S) Proprieturship FOWNERSHIP TYPE (S) Proprieturship FOWNERSHIP TYPE (S) Proprieturship FOWNERSHIP TYPE (S) Proprieturship STATE (S) COUNTY (S) Proprieturship SIT (S) COUNTY (S) CO	HOURS SINCE MIDLIFE								
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AIRCRAFT NOT HABITUALLY BASED IN THIS COUNTY  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 (ZI)  Proprietorship Corporation Corporation In Corporation Corporation Corporation Corporation Corporation Corporation Corporation 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* (typed or printed)  NAME OF LEGAL ENTITY (other than DBA) (typed or printed)  TILLE  TELEPHONE NUMBER  TITLE  TITLE  HANGARTIE-DOWN NO.  COUNTY  HANGARTIE-DOWN NO.  HANGARTIE-DOWN NO.  COUNTY  HANGARTIE-DOWN NO.  COUNTY  HANGARTIE-DOWN NO.  COUNTY  HANGARTIE-DOWN NO.  COUNTY  COUNTY  DOTHE:  ATTACH STATEMENT REGARDING ANY ADDITIONAL INFORMATION YOU FEEL WOULD ASSIST US IN VALUING YOUR AIRCRAFT.  IF OWNERSHIP TYPE (ZI)  DECLARATION BY ASSESSEE  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 proper statements or other attachments, and to the best of my knowledge and belief is true, correct, and complete and includes all property required to be reported which is owned, claimed, possessed in this statement at 12:01 a.m. on January 1, 20  SIGNATURE OF ASSESSEE OR AUTHORIZED AGENT* (typed or printed)  TITLE  NAME OF LEGAL ENTITY (other than DBA) (typed or printed)  TITLE  TITLE  TITLE  TITLE  TITLE  TITLE			· · · · · · · · · · · · · · · · · · ·				COUNTY		
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\*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.



EF-577-R06-0516-25000607