EF-577-A-R02-0809-29000248-1 BOE-577-A REV. 02 (08-09)

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AIRPORT OPERATIONS REPORT

Rolf D. Kleinhans Nevada County Assessor

Attn: Business Property Division 950 Maidu Avenue P.O. Box 599002 Nevada City, CA 95959-7902 Telephone (530) 265-1259 Fax (530) 265-9858

Email: assessor@nevadacountyca.gov

DAYTIME TELEPHONE

TO OWNERS AND OPERATORS OF PRIVATE AND PUBLIC AIRPORTS: Section 5368 of the Revenue and Taxation Code requires this form to be completed and returned to the County Assessor upon request. Pursuant to this section, the County Assessor hereby requests information regarding the aircraft registration number, make, model and arrival and departure information of all aircraft utilizing your airport facilities for the calendar year. The requested information may be provided in electronic format.

COUNTY		AIRPORT NAME	CALENDAR YEAR			
AIRCRAFT REGISTRATION NUMBER	AIRCRAFT TYPE MAKE AND MODEL	AIRCRAFT IDENTIFICATION (FLIGHT NUMBER)	INDICATE IF ARF	RIVAL OR LOCAL TIME AND DATE RE		
CERTIFICATION I certify (or declare) under penalty of perjury under the laws of the State of California that the foregoing and all information hereon, including an						
I certify (or declare) under pe accom	enalty of perjury under the law spanying statements or docur	ws of the State of California th ments, is true and correct to th	at the foregoing a ne best of my knov	ind all information hereon, including any wledge and belief.		
SIGNATURE				DATE		
NAME		TITLE				

THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION

E-MAIL ADDRESS