EF-577-A-R02-0809-49000315-1 BOE-577-A REV. 02 (08-09)

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AIRPORT OPERA	TIONS REPOR



Deva Marie Proto Sonoma County Clerk-Recorder-Assessor

Business Property Division 585 Fiscal Dr., Rm 104 Santa Rosa, CA 95403-2872 Telephone: (707) 565-1330 FAX: (707) 565-3317

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 ARRIVAL OR DEPARTURE	LOCAL TIME AND DATE	
		CERTIFICATION			
I certify (or declare) under pe accom	enalty of perjury under the law apanying statements or docur	ws of the State of California th ments, is true and correct to th	at the foregoing and all info	rmation hereon, including any d belief.	
SIGNATURE					
NAME			TITLE	TITLE	
E-MAIL ADDRESS			DAYTIME TE	DAYTIME TELEPHONE	

THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION