EF-571-RW-R05-0806-44000192-1 BOE-571-RW (S1F) REV. 5 (8-06)

# OFFICIAL REQUIREMENT

A report on this form is required of you by section 441(a) of the Revenue and Taxation Code. Failure to file it on time will compel the Assessor's Office to estimate the value of your property from other information in its possession and add a penalty of 10 percent as required by section 463 of the Code.

20

**RIGHT-OF-WAY** 

**PROPERTY STATEMENT** 

This statement is not a public document. The information contained herein will be held secret by the Assessor (section 451 Revenue and Taxation Code), it can be disclosed only to the district attorney, grand jury, and other agencies specified in section 408 of the Revenue and Taxation Code. Attached schedules are considered to be part of the statement. This statement is subject to audit.

**County of Santa Cruz Assessor** 701 Ocean Street, Rm. 130 Santa Cruz, CA 95060 Phone: 831-454-2002 Email: asrwebmail@co.santa-cruz.ca.us

Sheri Thomas

## RETURN THIS ORIGINAL. COPIES WILL NOT BE ACCEPTED.

Image: second control in the following declaration must be completed and signed. How do not do so, it may result in market.         CONTROL INFORMATION:           MARE	NAME	AND MAILING ADI	DRESS	(Make necess	ary corrections of the prin	ited name and mai	ling address.)	FILE RETU	RN BY AF	PRIL 1, 20	
A         B         C         Q         E         F         G           Marcel NO         Marcel N	Γ		011200	(indice necess				CONTACT	INFORM	ATION:	
Image: constraint of the second of								NAME			
Image: constraint of the second of								TITI F			
Image: constraint of the state of the s									NE INO.		
Image: constraint of the state of all of th											
PRE_UNANCE_LING ASSESSOR3 USE ONLY         ASSESSOR3 DESCONS/ DESCONS/ USE ONLY         ASSESSOR3 DESCONS/	L.							E-MAIL AD	DDRESS (	optional)	
No.         Control         No.         No.         Control         No.         No. <td></td> <td>А</td> <td></td> <td>В</td> <td>С</td> <td></td> <td>D</td> <td>E</td> <td></td> <td>F</td> <td>G</td>		А		В	С		D	E		F	G
MSSSSORS USE ONLY USE ONLY ONE SOLD OR AWARTIONED ONE SOLD OR ONE SOLD OR OTHER ONE SOLD OR OTHER ONE SOLD OR AWARTIONED ONE SOLD OR OTHER ONE SOL						-					
une       LINE       CASS       OVIN       BOORED       BOORED         ungo       Image: Second Secon	L	FILE/PARCEL NC	D.		DESIGNATION, N	AME, OR NO.	TYPE	WIDT	H-FT	ACQUIRED	BASIS
une       LINE       CASS       OVIN       BOORED       BOORED         ungo       Image: Second Secon	1EN <sup>-</sup>			ASSESSED VALUE OR TAXPAYER'S			CTATUC			ACT/EST	ACT/EST
une       LINE       CASS       OVIN       BOORED       BOORED         ungo       Image: Second Secon	20P	USE ONLY	DA	TE SOLD OR ABANDONED			STATUS	LEN		ACT/EST	ACI/ESI
Magoogs       Solution	S						LINE	CLASS	OWN	BOOKED	BOOKED
Mage       Image							LINE			DOONED	BOOKED
Mage       Image											
Mage       Image	IEN <sup>-</sup>										
Mage       Image	EGN										
Image:	S										
Image:								_			
Image:	⊢										
Image:	AEN										
Image:	EGN										
Image:	0,										
Image:											
Image:	Ę										
Image:	MEN										
Ideal       DECLARATION BY ASSESSEE       No. OF CONTINUATION SHEETS ATTACHED         Note: The following declaration must be completed and signed. If you do not do so, it may result in penalties.       No. OF CONTINUATION SHEETS ATTACHED         I declare under penalty of perjury under the laws of the State of California that I have examined this property 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, or managed by the person named as the assessee in this statement at 12:01 a.m. on January 1, 20       DATE         OWNERSHIP TYPE (3)       SIGNATURE OF ASSESSEE OR AUTHORIZED AGENT*       DATE         NAME OF ASSESSEE OR AUTHORIZED AGENT* (typed or printed)       TITLE         Partnership       MAME OF LEGAL ENTITY (other than DBA) (typed or printed)       TELEPHONE NO.         Other	SEG										
Ideal       DECLARATION BY ASSESSEE       No. OF CONTINUATION SHEETS ATTACHED         Note: The following declaration must be completed and signed. If you do not do so, it may result in penalties.       No. OF CONTINUATION SHEETS ATTACHED         I declare under penalty of perjury under the laws of the State of California that I have examined this property 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, or managed by the person named as the assessee in this statement at 12:01 a.m. on January 1, 20       DATE         OWNERSHIP TYPE (3)       SIGNATURE OF ASSESSEE OR AUTHORIZED AGENT*       DATE         NAME OF ASSESSEE OR AUTHORIZED AGENT* (typed or printed)       TITLE         Partnership       MAME OF LEGAL ENTITY (other than DBA) (typed or printed)       TELEPHONE NO.         Other											
Ideal       DECLARATION BY ASSESSEE       No. OF CONTINUATION SHEETS ATTACHED         Note: The following declaration must be completed and signed. If you do not do so, it may result in penalties.       No. OF CONTINUATION SHEETS ATTACHED         I declare under penalty of perjury under the laws of the State of California that I have examined this property 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, or managed by the person named as the assessee in this statement at 12:01 a.m. on January 1, 20       DATE         OWNERSHIP TYPE (3)       SIGNATURE OF ASSESSEE OR AUTHORIZED AGENT*       DATE         NAME OF ASSESSEE OR AUTHORIZED AGENT* (typed or printed)       TITLE         Partnership       MAME OF LEGAL ENTITY (other than DBA) (typed or printed)       TELEPHONE NO.         Other											
Ideal       DECLARATION BY ASSESSEE       No. OF CONTINUATION SHEETS ATTACHED         Note: The following declaration must be completed and signed. If you do not do so, it may result in penalties.       No. OF CONTINUATION SHEETS ATTACHED         I declare under penalty of perjury under the laws of the State of California that I have examined this property 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, or managed by the person named as the assessee in this statement at 12:01 a.m. on January 1, 20       DATE         OWNERSHIP TYPE (3)       SIGNATURE OF ASSESSEE OR AUTHORIZED AGENT*       DATE         NAME OF ASSESSEE OR AUTHORIZED AGENT* (typed or printed)       TITLE         Partnership       MAME OF LEGAL ENTITY (other than DBA) (typed or printed)       TELEPHONE NO.         Other	NT										
Image: Second secon	BME										
Description of the State of California that I have examined this property 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, or managed by the person named as the assessee in this statement at 12:01 a.m. on January 1, 20         OWNERSHIP TYPE (3)       SIGNATURE OF ASSESSEE OR AUTHORIZED AGENT*       DATE         Proprietorship	SEG										
Determined in Notest Determined in Notest Determined in Structure of California that I have examined this property 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, or managed by the person named as the assessee in this statement at 12:01 a.m. on January 1, 20											
I declare under penalty of perjury under the laws of the State of California that I have examined this property 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, or managed by the person named as the assessee in this statement at 12:01 a.m. on January 1, 20       DATE         OWNERSHIP TYPE (3)       SIGNATURE OF ASSESSEE OR AUTHORIZED AGENT*       DATE         NAME OF ASSESSEE OR AUTHORIZED AGENT* (typed or printed)       TITLE         Proprietorship       NAME OF LEGAL ENTITY (other than DBA) (typed or printed)       TITLE         Preparetry in the avent of the term of the term of term of the term of term of the term of the term of term of the term of										NO. OF CONTIN	UATION SHEETS ATTACHED
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, or managed by the person name as the assessee in this statement at 12:01 a.m. on January 1, 20 OWNERSHIP TYPE (3) Proprietorship Partnership Corporation Other Corporation Other _				-		-		-			
and complete and includes all property required to be reported which is owned, claimed, possessed, controlled, or managed by the person name as the assessee in this statement at 12:01 a.m. on January 1, 20 OWNERSHIP TYPE (3) SIGNATURE OF ASSESSEE OR AUTHORIZED AGENT* SIGNATURE OF ASSESSEE OR AUTHORIZED AGENT* (typed or printed) NAME OF ASSESSEE OR AUTHORIZED AGENT* (typed or printed) NAME OF LEGAL ENTITY (other than DBA) (typed or printed) NAME OF LEGAL ENTITY (other than DBA) (typed or printed) Preparentship Corporation PREPARER'S NAME AND ADDRESS (typed or printed) TELEPHONE NO. ()	I decla	are under penalty	y of perj	jury under the laws	of the State of California	ia that I have exa	mined this pro	perty stater d belief it i	nent, incl	uding	
OWNERSHIP TYPE (3)     SIGNATURE OF ASSESSEE OR AUTHORIZED AGENT*     DATE       NAME OF ASSESSEE OR AUTHORIZED AGENT* (typed or printed)     TITLE       Proprietorship     NAME OF LEGAL ENTITY (other than DBA) (typed or printed)     TITLE       Outpoint     PREPARER'S NAME AND ADDRESS (typed or printed)     TELEPHONE NO.       Other     Image: Composition of the composition o	and c	omplete and inc	cludes a	all property require	d to be reported whic	h is owned, clái	ned, possesse	d, controlle	d, or mar	naged	
OWNERSHIP TYPE (3)     Image: Composition of the composition of		-				n January 1, 20	·		DATE		
NAME OF ASSESSEE OR AUTHORIZED AGENT* (typed or printed)     TITLE       Proprietorship     Image: Corporation     NAME OF LEGAL ENTITY (other than DBA) (typed or printed)     FEDERAL EMPLOYER ID NO.       Corporation     Image: Corporation Corporation     Image: Corporation Corporation Corporation     TELEPHONE NO.       Other     Image: Corporation Corpora	C	-		UNL OF ASSESSEE OK AUT					DATE		
Proprietorship     Image: Composition     NAME OF LEGAL ENTITY (other than DBA) (typed or printed)     FEDERAL EMPLOYER ID NO.       Corporation     Image: Composition     Image: Composition     TELEPHONE NO.       Other Image: Composition     Image: Composition     Image: Composition		11FE (3)	-	OF ASSESSEE OR AUTHOR	IZED AGENT* (typed or printed	d)			TITLE		
Partnership	Proprie	etorship 🔲									
Corporation	Partner	rship 🗖	NAME O	OF LEGAL ENTITY (other th	nan DBA) (typed or printed)				FEDER	AL EMPLOYER ID NO.	
Other     ()		·				,					
			PREPARE	ER'S NAME AND ADDRES	S (typed or printed)	TE	EPHONE NO.		TITLE		
	Other_	U			*^		)	ction -			

THIS STATEMENT SUBJECT TO AUDIT



NAME

	A	В	С	D	E		F	G
F	FILE/PARCEL NO.	ASSESSED VALUE OR	DESIGNATION, NAME, OR NO.	TYPE	WIDTH	I-FT	ACQUIRED	BASIS
SEGMENT	ASSESSOR'S USE ONLY	TAXPAYER'S DATE SOLD OR ABANDONED		STATUS	LENG	ТН	ACT/EST	ACT/EST
5				LINE	CLASS	OWN	BOOKED	BOOKED
NT								
SEGMENT		TL	110		C		Λ	
1ENT							A	
SEGMENT								1
ENT			$4\Lambda/H$					
SEGMENT								
ΤN		$\square$					T	
SEGMENT								
					-			
SEGMENT			US					
SEGMENT								
SEC								
NT								
SEGMENT								
							CONTINUATION SHEET N	10.

# 

## INSTRUCTIONS FOR RIGHT-OF-WAY PROPERTY STATEMENT

Verify or provide your name and mailing address on the front of the property statement. Also provide the name, title, telephone number, and fax number of the person to contact regarding this property statement.

The property statement must be executed (signed) in accordance with Rule 172, Title 18, California Code of Regulations and submitted to Assessor.

On the back of the property statement is a continuation sheet that is intended to be copied as needed. In lieu of filling out the continuation sheets manually, you may attach the information in another format, such as computer-prepared listings, provided that the attachments are in a format as specified by the Assessor. If the Assessor has provided a listing of segments, use the continuation sheet for reporting newly acquired segments, previously unreported segments, or segments not shown in detail listing.

Report all rights-of-way situated in this county that you owned, claimed, possessed, controlled, or managed on the tax lien date, except do not report rights-of-way assessed by the California State Board of Equalization or rights-of-way assessed with another property such as an oil lease. The property statement will be rejected if segment information is not provided as requested in these instructions or if the property statement is captioned "No Change," "Change Only Listing," "Same as Last Year," or similar wording.

List segments in file/parcel number and segment name order. List new segments separately for both manually- and computer-prepared listings. Provide maps for all rights-of-way acquired since the previous lien date.

Column E — Width. It is acceptable to report an average width for rights-of-way having similar characteristics. You may also provide your "best reasonable guess." If the width is unknown or undefined, report the width as "1" (foot).

Column E — Length. It is acceptable to report an average amount per length for rights-of-way having similar characteristics. It is not expected or required that you report the exact amount for each and every length. Please use prudent reasonable judgment in allocating accounting costs and property tax basis.

#### 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 ELC manager, or by a member where there is no 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.

# EXAMPLE AND EXPLANATION OF INFORMATION REQUIRED IN EACH COLUMN

Example

	A	В		D	E	F	G
F	FILE/PARCEL NO.	ASSESSED VALUE OR	DESIGNATION, NAME, OR NO.	TYPE	WIDTH-FT	ACQUIRED	BASIS
SEGMENT	ASSESSOR'S USE ONLY	TAXPAYER'S DATE SOLD OR ABANDONED		STATUS	LENGTH	ACT/EST	ACT/EST
S				LINE	CLAS <mark>S</mark> OWN	BOOKED	BOOKED
Ŀ	25-1234567-123		PL1 - PL2	A	25	03/01/1975	41020
SEGMENT			761477A	0	8356	В	В
S			NEAR HWY 55	1	3 D	07/01/1948	5100

### Explanation

COLUMN	ITEM	DESCRIPTION
А	File/Parcel No.	Assessor's file or parcel number. Enter "NEW" for newly acquired segments not re-
		ported previously.
	Assessor's Use Only	Leave this item (cell) blank.
В	Assessed Value or Date	Leave this item blank unless sold or abandoned. Enter "S" or "A" and the date
	Sold or Abandoned	(e.g., A-5/15/95).



COLUMN	ITE		DESCRIPTION				
C	Designation, N	lame, or No.	Enter the right-of-way name, number, or other designation.				
			This item is for your use, such as location coding, map reference, accounting informa				
			tion, etc. Indicate the purpose of the item (see example "Location").				
			This item is for your use, such as location coding, map reference, accounting informa				
			tion, etc. Indicate the purpose of the item (see example "Remarks").				
D	Туре		Enter "A" for intercounty or "B" for intracounty. An intercounty right-of-way starts in				
			one county and ends in another.				
	Status		Enter one of the following status codes:				
			"A" - Abandoned during the past year.				
			"S" - Sold during the past year.				
			"I" - Idle in which no pipelines exist.				
			"O" - Operational in which one pipeline exists.				
	Lines		Enter the number of pipelines within the right-of-way excluding pipelines belonging				
			to others.				
E	Width-Ft		Enter the right-of-way width in feet using whole numbers. An average width may be				
		-	entered for rights-of-way having similar characteristics. A "best guess" is acceptable. I				
			width is unknown or undefined, enter 1.				
	Length		Enter the right-of-way length in feet using whole numbers (no decimal).				
	Class	O <mark>wn</mark> ership	En <mark>te</mark> r one of the following land classification codes (contact the Assessor for the defi				
			nitions and use of these codes):				
	_		"1" through "5" - The Assessor uses a predetermined value per mile				
			based on type and location of the right-of-way; for example, a class				
			code of "1" may be used for rights-of-way going through a large city.				
			"N" - Not valued; for example, no pipelines exist because current				
			environmental laws preclude construction.				
			"A" - The Assessor is using an acquisition date and cost different from				
			those associated with class codes "1" through "5."				
			Enter one of the following ownership codes:				
			"D" - The surface, non-government land owner and the right-of-way owner				
			are different.				
			"P" - The surface owner is a government entity.				
			"S" - The surface, non-government land owner and the right-of-way owner				
			are the same.				
F	Acquired		Enter the date acquired for property tax purposes. The date may or may not be the				
			same as the date for accounting purposes. The date may be the established base yea				
			actual acquisition date, or an alternate date set by the Assessor.				
	Act/Est		Enter one of the following codes relating to the acquired date:				
			"A" - Actual date of acquisition.				
			"E" - Actual date is unknown, the date provided is your best guess.				
			"Y" - The acquisition year is actual, but the month and day are estimated.				
			"B" - Base year as set by the Assessor, or the date associated with class				
			code "1" through "5."				
	Booked		Enter the date when the right-of-way was first reflected in your accounting records.				
			Leave this blank if not in your books.				
G	Basis		Enter the property tax basis. The amount to report is the full purchase price including				
			survey fees, legal charges, and other acquisition expenses, whether or not the ex-				
			penses are capitalized for income tax or financial reporting purposes. Gifts and other				
			non-cash grants to the seller must be converted to cash equivalent and added to the				
			purchase price. If the Assessor uses a land classification value code other than "A," the				
			basis will be changed to reflect the value associated with that class code.				
	Act/Est		Enter one of the following codes relating to the "Basis:"				
			"A" - Actual cost.				
			"E" - Actual cost is unknown, the basis reported is your best guess.				
			"B" - Basis as set by the Assessor, or the basis associated with class code				
			"B" - Basis as set by the Assessor, or the basis associated with class code "1" through "5".				
	Booked		"1" through "5".				
	Booked						

