EF-577-R06-0516-51000374-1 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____



Kathy Scriven Sutter County Assessor

1160 Civic Center Blvd., Suite D Yuba City, CA 95993 Phone Number: (530) 822-7160 Fax Number: (530) 822-7198 Email: assessor@co.sutter.ca.us

FILE RETURN BY:			
	This form must b e, regardless of	,	

Assessor's office, regardless of the status of any Historical Aircraft Exemption Claim. Penalties will apply if not filed.

NAME AND MAILING ADDRESS

(Make necessary corre	ctions to the printe	d name and mailin	g address)	٦	FOR A	ASSESSOR'S	USE ONLY	
ı				'				
CECTION & MUST BE COMP	ETER ANNUA	1114						
SECTION I: MUST BE COMP FAA REGISTRATION NUMBER		YTIME PHONE NU	IMBER AIRCE	AFT LOCATION (A	IRPORT, HANGAR OF	R TIF-DOWN I	NUMBER)	
N	()	SINBER	0 ti 1 20 07 ti 10 ti (7 ti		(IIE BOUNT	TO MIDER ()	
MANUFACTURER		MO	DEL				,	YEAR BUILT
_							_	
SERIAL NUMBER		PUF	RCHASE DATE	PURCHASE PRI	CE	DATE MOVE	TO THIS CO	DUNTY
				\$				
FOR AIRCRAFT PREVIOUSLY RE	GISTERED OR A	SSESSED IN ANO	THER CALIFORN	IA COUNTY, INDIC.	ATE COUNTY NAME	AND ASSESS	MENT YEAR	S
FIXED BASE OPERATOR NAME			LAST MAJO	R AIRFRAME OVE		COST:		
AIRCRAFT CONDITION:			W/ //					
WHEN PURCHASED NEV	W GOOD	AVERAGE	POOR	DAMAGE HIST		TOUGTIONS	AND ATTACK	
CURRENT NEV	H	AVERAGE			NO IF YES, SEE INS			
INTERIOR NEV		AVERAGE			EASED, EXCHANG NO <i>IF</i> YES, <i>SEE INS</i>			
TYPE OF USAGE:	V GOOD	AVERAGE	POOR		INO IF TES, SEE INS	TRUCTIONS	AND ATTACK	1 SCHEDULE.
	LIGHT TRAINING	RENTAL	CHARTER/TAXI	BUSINESS	FRACTIONAL OWN	ERSHIP PRO	GRAM SH	HOW/MUSEUM
IF YOU CHECKED CHART	TER/TAXI, DO YO	U USE THE AIRCE	RAFT IN COMMON	CARRIAGE MORI	THAN 50% OF THE	TIME? Y	ES NO	
					PART 91 OWNER FL			
AVIONICS SUMMA				S. DO NOT REPO!) NEW, (A) AVERAC	RT ORIGINAL STANDA	ARD FACTOR	Y AVIONICS.	
LIMIT	ACQUISITION	COST	ACCECCOD	, , ,	ACQUISITIO	N COST	CONDITION	ASSESSOR

FOR CONDITION, PLEASE ENTER (N) NEW, (A) AVERAGE, (P) POOR.										
UNIT	ACQUISITION DATE	COST NEW	CONDITION	ASSESSOR USE ONLY	UNIT	4	CQUISITION DATE	COST NEW	CONDITION	ASSESSOR USE ONLY
RVSM REDUCED VERTICAL SEPARATION MINIMUM MONITOR					RADAR ALTIMETER		7			
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 HIGH FREQUENCY					
GPS IFR GLOBAL POSITIONING SYSTEM, INSTRUMENT FLIGHT RULES					OTHER NON-FACTORY AVIONICS					

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



EF-577-R06-0516-51000374-2

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

PLEASE ENTER INFORMATION AS OF JANUARY 1 OF THIS YEAR.

AIRFRAME HOURS:						
ENGINE(S)	SINGLE	LEFT	RIGHT	FOR HELI	COPTERS - HOURS SINC	E MAJOR OVERHAUL:
MAKE				ENGINE	MAIN ROTOR BLADES	MAIN ROTOR HEAD ASSEMBLY
MODEL				MAST	MAST	TAIL ROTOR
YEAR OF MANUFACTURE					TRANSMISSION	DRIVESHAFT
HORSEPOWER				TAIL ROTOR GEARBOX	TAIL ROTOR HUB ASSEMBLY	TAIL ROTOR BLADES
HOURS SINCE NEW				SERVOS	MISCELLANEOUS	55.525
HOURS SINCE MAJOR OVERHAUL						
TIME BETWEEN OVERHAULS (TBO)						
HOURS SINCE MIDLIFE						
DATE OF MAJOR OVERHAUL						
DATE OF LANDING GEAR OVERHAUL]		
ENGINE MAINTENANCE SERV	/ICE PROGRAM: [YES NO				
NAME OF PROGRAM:	DEDINAENTAL ALDOL	DAET ENTED E	VACT DATE OF	ENROLLMEN'	T DATE:	
FOR HOMEBUILT, KIT, OR EXP					DARWEAR	/
SECTION II: COMPLETE IF FIF NAME AND ADDRESS OF OWNER				HE LAST CALEN	DAR YEAR	
NAME		AC	DDRESS			
OUTV			lo	FATE TIP CODE		
CITY			5	TATE ZIP CODE	COUNTY	_
IF AIRCRAFT WAS SOLD, ATTACH	A COMPLETE COPY	OF THE SALES	CONTRACT			
IF SOLD OR DONATED: DATE O			ALE PRICE			
		\$				
NEW OWNER NAME		A	DDRESS			
CITY)	\ 	SI	TATE ZIP CODE	COUNTY	
					94	
IF: MOVED JUNKED	PARTED DEST	ROYED ABA	NDONED	'	'	
DATE NEW LOCATI	ON (IF MOVED)				COUNTY	
EVEL ANIATION			$\overline{}$			·
EXPLANATION						
AIRCRAFT NOT HABITUALLY BAS				V	HANGAR/TIE-DOV	VNI NO
AIRPORT/FBO WHERE NORMALE	r KEPT		_		HANGAR/TIE-DOV	VN NO.
CITY			S1	ATE ZIP CODE	COUNTY	
CHECK REASON AIRCRAFT IS OR	WAS IN THIS COUNT	TY: REPAIRS	FOR SALE	IN TRANSIT TO:		
				OTHER:		
ATTACH STATEMENT R				FEEL WOULD A A LIST OF MEME		YOUR AIRCRAFT.
OWNERSHIP TYPE (☑)				ON BY ASSES		
					ou do not do so, it may	y result in penalties. examined this property
Corporation	nent, including accor	mpanying schedi	ules, statements o	or other attachmer	nts, and to the best of m	y knowledge and belief it
					reported which is owne at at 12:01 a.m. on Janua	ed, claimed, possessed,
SIGNATURE OF ASSESSEE OR AUTHO		the person name	eu as me assesse	ee in this statemen	DATE	ary 1, 20
•						
NAME OF ASSESSEE OR AUTHORIZED	AGENT* (typed or printed	d)			TITLE	
NAME OF LEGAL ENTITY (other than DB	BA) (typed or printed)				FEDERAL EMPLOYER ID NUI	MBER
PREPARER'S NAME AND ADDRESS (type	ped or printed)		TELEPHONE	NUMBER	TITLE	
E MAIL ADDRESS			[()			
E-MAIL ADDRESS						

*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, 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-R06-0516-51000374