EF-577-R07-0518-26000171-1 BOE-577 (P1) REV. 07 (05-18)

FILE RETURN BY: \_\_\_\_\_

# **AIRCRAFT PROPERTY STATEMENT**

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



Barry Beck, Assessor

PO Box 456

Bridgeport, CA 93517-0456 Telephone: 760-932-5510 Fax: 760-932-5511

Email: assessor@mono.ca.gov

Website: www.monocounty.ca.gov/assessor

**Mono County Office Of The Assessor** 

PLEASE NOTE: Thi Assessor's office, re Aircraft Exemption	egardle	ess of the st	atus of a	ıny Historic	al						
Aircraft Exemption Claim. Penalties will apply if not filed NAME AND MAILING ADDRESS (Make necessary corrections to the printed name and mailing ad						FOR			ASSESSOR'S USE ONLY		
L SECTION I: MUST BE	СОМРЬ	ETED ANNU	ALLY			٦				<u> </u>	
1. FAA REGISTRATION NI	UMBER	1	DAYTIME P	HONE NUMBE	R AIRCR	AFT LOC	ATION (AIRPORT	, HANGAR OR	TIE-DOWN	NUMBER)	
MANUFACTURER				MODEL						,	YEAR BUILT
SERIAL NUMBER				PURCHA	SE DATE	PURCH	IASE PRICE	D.	ATE MOVE	D TO THIS CO	OUNTY
FOR AIRCRAFT PREVIOU	ISLY RE	GISTERED OR	ASSESSE	D IN ANOTHER	R CALIFORNI	A COUN	TY, INDICATE CO	UNTY NAME AN	ND ASSES	SMENT YEARS	S
FIXED BASE OPERATOR	NAME				LAST MAJOF	RAIRFRA	ME OVERHAUL	DATE: C	OST:		
2. AIRCRAFT CONDIT	ION:										
WHEN PURCHASED [	NEV			VERAGE	POOR	_	SE HISTORY				
CURRENT	NEV			VERAGE [	POOR		YES NO IF	· ·			
INTERIOR	NEV	V GOO		VERAGE	POOR		MENT LEASED				
EXTERIOR	NEV	V GOO	P	VERAGE	POOR		YES NO IF	YES, SEE INST	RUCTIONS	S AND ATTACE	A SCHEDULE.
3. TYPE OF USAGE:											
PERSONAL/PLEASUR IF YOU CHECKED	CHART		OU USE TI	HE AIRCRAFT		CARRIA		50% OF THE T	IM <mark>E?</mark>	OGRAMSH YESNO	HOW/MUSEUN
4. AVIONICS		RY: REPORT C	NLY ADDE	D OR REPLAC	ED AVIONIC	S. DO NO	GHTS OR PART OT REPORT ORIO ) AVERAGE, (P) I	GINAL STANDAR		RY AVIONICS.	
UNIT		ACQUISITION DATE	COST	CONDITION	ASSESSOR USE ONLY	1, (, .	UNIT	ACQUISITION	COST	CONDITION	ASSESSOR USE ONLY
RVSM REDUCED VERTICAL SEPARATION MINIM	иим				002 0.112.	RADAR	ALTIMETER				552 5.1.2.
MONITOR TAWS						ENCODER					
TERRAÍN AWARENESS WARNING SYSTEM						RMI		-			
EFIS ELECTRONIC FLIGHT INSTRUMENT SYSTEM						RADIO MAGNETIC INDICATOR					
TCAS TRAFFIC ALERT COLLISION AVOIDANCE SYSTEM						VLF VERY LOW FREQUENCY					
NAVCOM#1						PHONE					
NAVCOM #2 TRANSPONDER						RADAR					
A C											
GLIDESLOPE						ADF AUTOMATIC DIRECTION FINDER					
LOCALIZER						DME DISTANCE MEASURING EQUIPMENT					
COMPASS SYSTEM/HSI HORIZONTAL SITUATION INDICATOR						AIR CONDITIONING					
AUTOPILOT NUMBER OF AXIS						BOOTS					
FLIGHT DIRECTOR						HF TRANSCEIVERS HIGH FREQUENCY					
GPS IFR GLOBAL POSITIONING SYSTEM, INSTRUMENT FLIGHT RULES						OTHER I	NON-FACTORY S				
			A TION D	V 400E00E	= <del></del>		T DE COMPLE	TED AND 616	==		

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



BOE-577 (P2) REV. 07 (05-18) **SECTION I: (continued)** 

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

5.	ENGINE(S)	SINGLE	LEFT	RIGHT	6. TOTAL AIRFRAME HOURS:				
	MAKE				6. IOIAL	AIRFRAIME HOU	K3		
	MODEL								
	EAR OF MANUFACTURE			EOD HELL	HELICOPTERS - HOURS SINCE MAJOR OVERHAUL:				
	HORSEPOWER				ENGINE	MAIN ROTOR	MAIN ROTOR		
	HOURS SINCE NEW				LIVOINE	BLADES	HEAD ASSEMBLY		
	HOURS SINCE MAJOR OVERHAUL				MAST	MAST TRANSMISSION	TAIL ROTOR DRIVESHAFT		
	HOURS SINCE MIDLIFE				TAIL ROTOR GEARBOX	TAIL ROTOR HUB ASSEMBLY	TAIL ROTOR BLADES		
	DATE OF MAJOR OVERHAUL				SERVOS	MISCELLANEOUS	BLADES		
	DATE OF MAJOR OVERHAUL				SERVOS	MIGGELEANEOGO			
	GINE MAINTENANCE SERVICE ME OF PROGRAM:	= PROGRAM:	YES NO		ENROLLMENT I	DATE:			
FO	R HOMEBUILT, KIT, OR EXPER	IMENTAL AIRCRA	AFT, ENTER EXA	CT DATE OF FIR	ST FLIGHT:				
	CTION II: COMPLETE IF F <mark>IR</mark> ST				LAST CALENDA	AR YEAR	1		
NA NA	ME AND ADDRESS OF OWNER IF I	DIFFERENT FROM	AA REGISTERED						
14/ (	IVIL		ABBIN						
CIT	Y			STATE	ZIP CODE	COUNTY			
_									
IF A	IRCRAFT WAS SOLD, ATTACH A C	OMPLETE COPY O	F THE SALES CON	ITRACT					
IF S	SOLD OR DONATED: DATE OF SA	ALE		PRICE					
NF	W OWNER NAME	_	\$ ADDR	RESS					
	W OWNER TO TIME		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						
CIT	Υ			STATE	ZIP CODE	COUNTY			
IF:	MOVED JUNKED PA	RTED DESTR	DYED ABAND	ONED					
DA	TE NEW LOCATION	(IF MOVED)				COUNTY			
<u></u>	DI ANIATIONI								
ΕXI	PLANATION								
AIR	CRAFT NOT HABITUALLY BASED	IN THIS COUNTY							
AIR	PORT/FBO WHERE NORMALLY KE	PT				HANGAR/TIE-DOWN	NO.		
CIT	Y			STATE	ZIP CODE	COUNTY			
CH	ECK REASON AIRCRAFT IS OR WA	S IN THIS COUNTY	REPAIRS	EOR SALE	N TRANSIT TO:				
0									
	ATTA OLI OTATEMENT DEO	ADDING AND A	NITIONIA INFO		THER:	NOT HO IN MALLINO M			
	ATTACH STATEMENT REG	ARDING ANY ADI IF OWNERSHIP T					OUR AIRCRAFT.		
O'	WNERSHIP TYPE (☑)		1	DECLARATION	BY ASSESSE	Ε			
Pr	oprietorship Note	: The following d	eclaration must	be completed an	d signed. If you	do not do so, it may r	esult in penalties.		
	Partnership  Composition  I certify (or 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								
_	ther is true, co					hich is owned, claimed,			
SIG	NATURE OF ASSESSEE OR AUTHORIZE		e person named	as the assessee i		at 12:01 a.m. on Januar <sub>TE</sub>	y 1, 20		
SIGNATURE OF ASSESSEE OR AUTHORIZED AGENT*						DAIL			
NA	ME OF ASSESSEE OR AUTHORIZED AGE	ENT* (typed or printed)	TI	TITLE					
NA	ME OF LEGAL ENTITY (other than DBA) (t	yped or printed)	FE	FEDERAL EMPLOYER ID NUMBER					
PR	EPARER'S NAME AND ADDRESS (typed o	or printed)		TELEPHONE NUM	MBER TI	ΓLE	_		
E-N	MAIL ADDRESS								

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.



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