EF-571-RW-R05-0806-38000159-1 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.

Joaquin Torres Assessor-Recorder Office of the Assessor-Recorder 1 Dr. Carlton B. Goodlett Place - Room 190 San Francisco, CA 94102 www.sfassessor.org (415) 554-5596

RETURN THIS ORIGINAL. COPIES WILL NOT BE ACCEPTED.

	NAME	AND MAILING AD	DRESS (Make necessary corrections of the printed name and mailing address.)	FILE RETURN BY APRIL 1, 20			
Matrix         Matrix<				CONTACT INFORMATION:			
				NAME			
Image: bit is the second of the sec				TITLE			
FX NO.         E-MAIL ADDRESS (optional)           Image         B         C         D         E         F         G           Image         Intermediation         Address         Basic         Basic <td< td=""><td></td><td></td><td></td><td></td></td<>							
A         B         C         D         E         F         G           Main PR         ACUEST MULLION         ACUEST MULIION ACUEST							
A         B         C         D         E         F         G           Main PR         ACUEST MULLION         ACUEST MULIION ACUEST							
No.         PRE_PARCEL NO.         NO.000000000000000000000000000000000000							
MONOGONE       MACTINEST		А	B C D	E F G			
une       LINE       CANS       OWN       BOORD       BOORD         ungo	Ļ	FILE/PARCEL NC		WIDTH-FT ACQUIRED BASIS			
une       LINE       CANS       OWN       BOORD       BOORD         ungo	EGMEN		TAXPAYER'S	LENGTH ACT/EST ACT/EST			
Magon         Male         Male <t< td=""><td>SE</td><td></td><td>LINE</td><td>CLASS OWN BOOKED BOOKED</td></t<>	SE		LINE	CLASS OWN BOOKED BOOKED			
Lange         Lange <thlange< th="">         Lange         <thl< td=""><td>F</td><td></td><td></td><td></td></thl<></thlange<>	F						
Lange         Lange <thlange< th="">         Lange         <thl< td=""><td>3MEN</td><td></td><td></td><td></td></thl<></thlange<>	3MEN						
Image:	SE						
Image:							
Image:	MENT						
Image:	SEC						
Image:							
Image:	MENT						
Ide last DECLARATION BY ASSESSEE   Note: The following declaration must be completed and signed. If you do not do so, it may result in penalties.   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   OWNERSHIP TYPE (3) SIGNATURE OF ASSESSEE OR AUTHORIZED AGENT*   NAME OF ASSESSEE OR AUTHORIZED AGENT* DATE   NAME OF LEGAL ENTITY (other than DBA) (typed or printed) TITLE   Partnership I   Other PREPARER'S NAME AND ADDRESS (typed or printed)   TELEPHONE NO. TITLE	SEG						
Ide last DECLARATION BY ASSESSEE   Note: The following declaration must be completed and signed. If you do not do so, it may result in penalties.   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   OWNERSHIP TYPE (3) SIGNATURE OF ASSESSEE OR AUTHORIZED AGENT*   NAME OF ASSESSEE OR AUTHORIZED AGENT* DATE   NAME OF LEGAL ENTITY (other than DBA) (typed or printed) TITLE   Partnership I   Other PREPARER'S NAME AND ADDRESS (typed or printed)   TELEPHONE NO. TITLE							
Ide last DECLARATION BY ASSESSEE   Note: The following declaration must be completed and signed. If you do not do so, it may result in penalties.   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   OWNERSHIP TYPE (3) SIGNATURE OF ASSESSEE OR AUTHORIZED AGENT*   NAME OF ASSESSEE OR AUTHORIZED AGENT* DATE   NAME OF LEGAL ENTITY (other than DBA) (typed or printed) TITLE   Partnership I   Other PREPARER'S NAME AND ADDRESS (typed or printed)   TELEPHONE NO. TITLE	MENT						
Note: The following declaration must be completed and signed. If you do not do so, it may result in penalties.         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         OWNERSHIP       SIGNATURE OF ASSESSEE OR AUTHORIZED AGENT*         TYPE (3)       SIGNATURE OF ASSESSEE OR AUTHORIZED AGENT* (typed or printed)         NAME OF ASSESSEE OR AUTHORIZED AGENT* (typed or printed)       TITLE         Proprietorship       Intervention DBA) (typed or printed)       FEDERAL EMPLOYER ID NO.         Other	SEGN						
Note: The following declaration must be completed and signed. If you do not do so, it may result in penalties.         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         OWNERSHIP       SIGNATURE OF ASSESSEE OR AUTHORIZED AGENT*       DATE         NAME OF ASSESSEE OR AUTHORIZED AGENT* (typed or printed)       TITLE         Proprietorship       Instruction DBA) (typed or printed)       TITLE         Partnership       NAME OF LEGAL ENTITY (other than DBA) (typed or printed)       TELEPHONE NO.         Other       PREPARER'S NAME AND ADDRESS (typed or printed)       TELEPHONE NO.       TITLE							
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 name as the assessee in this statement at 12:01 a.m. on January 1, 20							
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 [ PREPARER'S NAME AND ADDRESS (typed or printed) PREPARER'S NAME AND ADDRESS (typed or printed) TELEPHONE NO. TELEPHONE NO. TELEPHONE NO. TITLE							
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	l decla accon	are under penalt npanying sched	y of perjury under the laws of the State of California that I have examined this p ules, statements or other attachments, and to the best of my knowledge a	and belief it is true, correct,			
OWNERSHIP TYPE (3)     SIGNATURE OF ASSESSEE OR AUTHORIZED AGENT*     DATE       Proprietorship     Initial     Initial       Partnership     Initial     NAME OF LEGAL ENTITY (other than DBA) (typed or printed)     FEDERAL EMPLOYER ID NO.       Other     Initial     Initial       Other     Initial     Initial	and complete and includes all property required to be reported which is owned, claimed, possessed, controlled, or managed						
TYPE (3)     Image: Constraint of the system o				DATE			
NAME OF ASSESSEE OR AUTHORIZED AGENT* (typed or printed)     TITLE       Proprietorship							
Partnership     NAME OF LEGAL ENTITY (other than DBA) (typed or printed)     FEDERAL EMPLOYER ID NO.       Corporation     PREPARER'S NAME AND ADDRESS (typed or printed)     TELEPHONE NO.       Other     V     V			NAME OF ASSESSEE OR AUTHORIZED AGENT* (typed or printed)	TITLE			
Partnership     I       Corporation     PREPARER'S NAME AND ADDRESS (typed or printed)       Other     I       Image: Corporation     Image: Corporation of the printed of t	Proprietorship 🛛						
Other     Image: Composition in the analysis (typed or printed)     Image: Composition in the analysis (typed or printed)	Partnership 🗌		NAME OF LEGAL ENTITY (other than DBA) (typed or printed)	FEDERAL EMPLOYER ID NO.			
	Corporation 🛛		PREPARER'S NAME AND ADDRESS (typed or printed) TELEPHONE NO.	TITLE			
	Other_	□					

THIS STATEMENT SUBJECT TO AUDIT



	А	В	С	D	E		F	G
	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
S				LINE	CLASS	OWN	BOOKED	BOOKED
NT								
SEGMENT		TL	JIC		C		Λ	
SEGMENT							A	
SEG								
SEGMENT		5/	<b>ANH</b>					
SEG								
SEGMENT		D	$O \wedge$				T	
SI								
SEGMENT								
SEG								
ΤΛ								
SEGMENT								
SEGMENT								
SEGI								
							CONTINUATION SHEET N	IO.

## 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
	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
SI				LINE	CLAS <mark>S</mark> OWN	BOOKED	BOOKED
Ŀ	25-1234567-123		PL1 - PL2	А	25	03/01/1975	41020
SEGMENT			761477A	0	8356	В	В
			NEAR HWY 55	1	3 D	07/01/1948	5100

## Explanation

COLUMN	ITEM	DESCRIPTION
A	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	ITEM	DESCRIPTION			
C	Designation, Name, o	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 Owner	ship Enter 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			
·	ricquireu	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.			
	DUUKEU	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			
G	Dasis	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			
	A at /E at	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			
		"1" through "5".			
	Booked	Enter the actual amount booked in your accounting records.			

