



COUNTY OF YOLO

ASSESSOR'S OFFICE
625 COURT STREET, ROOM 104, WOODLAND CA 95695
(P) 530.666.8135 (F) 530.666.8213

JESSE SALINAS
ASSESSOR



AIRCRAFT OWNER'S REPORT OFFICIAL REQUEST FOR INFORMATION

Airport

Aircraft Number

Assessor Account Number

APN

Dear Property Owner,

Records in the Assessor's Office indicate you are the current registered owner of the aircraft identified above. *Please Note:* failure to comply will result in assessment by estimate, per section 501, revenue & taxation code.

As per Section 451 of the Revenue & Taxation Code of the State of California, all information provided will be kept confidential.

Please complete this questionnaire and return it to our office within **fifteen (15) days** from the date of this notice. If you have any questions, please contact **Jennifer St.Louis** at 530-666-8135 ext. **9357** or email jennifer.stlouis@yolocounty.org

Thank you for your cooperation,

Jesse Salinas,
Assessor/Clerk-Recorder/Registrar of Voters

Assessor's Use

S.C. Mailed

\$ _____
Value

Principal Location of Aircraft Regarding THIS Aircraft--Use of: Hangar Tie Down No Hangar or Tie Down **Date Aircraft entered Yolo Co.**

Airport Other _____
Address _____ City _____ Month _____ Date _____ Year _____

Aircraft Make _____ **Model** _____ **Serial Number** _____ New Used

Date of Purchase _____ **Total Purchase Price \$** _____ **Year Built** _____ **Air Hours** _____

Rebuilt Date _____ **Hours SMOH (Since Major Over Haul)** _____ **Extra Equipment** _____

Engine Data **Make** _____ **Year Built** _____ **Model Number** _____ **Horsepower** _____

Air Hours _____ **Re-Engined -** No Yes-Date _____ **Hours SMOH (Since Major Over Haul)** _____

IMPORTANT: The registered owner on lien date, 12:01 a.m.. January 1, is liable for personal property tax (sections 405 and 2192, revenue & taxation code). Please report any change in ownership or location to avoid assessment to the incorrect owner.

--IF AIRCRAFT HAS BEEN SOLD-- **Bill of Sale Date** _____ **Sales Price \$** _____

New Owner Information: Name _____ **Phone (_____)** _____

Address _____ **City** _____ **State** _____ **Zip** _____

Remarks: _____

I certify (or declare) under penalty of perjury under the laws of the State of California, that this statement, including any accompanying documentation, is true and correct, and that it is complete to the best of my knowledge and belief.

Printed name of Owner or Agent Title (if agent) (_____) Daytime Phone (8AM-5PM)

Signature of Owner or Agent Date Email Address