



AVIATION AUTHORITY PERMIT APPLICATION



*Tampa International Airport Peter O. Knight Airport Plant City Airport Vandenberg Airport
P.O. Box 22287, Tampa, FL 33622-2287*

Scope/Nature of Request: (Provide summary of request, activities involved and any other required or pertinent information to fully describe scope, submit drawings and specification if needed. Additional pages may be used if necessary.)

Request Date: _____ Airport: _____

Permit Required Date From _____ to _____

Applicant acknowledges receipt of the applicable procedures and/or provisions pertaining to the above request and agrees that in consideration of issuance of this permit to be bound by the terms and conditions of such documents, those indicated on the reverse side of permit issued and all other applicable laws, rules, regulations, procedures and laws.

Name/Company/Organization: _____

Contact Person for Requested Activity: _____ Title: _____

Mailing address: _____

City: _____ State: _____ Zip Code: _____

Phone No. _____ Fax No. _____ E-mail Address: _____

I hereby certify that the above statements are true and correct and I have full power and authority to act on behalf of the above named firm, corporation or organization in the submission of this application.

Printed Name of Authorized Representative: _____

Signature of Authorized Representative: _____ Date: _____

All activities performed under this permit is at applicants own expense and risk, the Authority shall not be held liable for any damages, losses or injuries resulting from or connected with this activity.

This Section to be Completed By Aviation Authority Representative

Permission is hereby authorized for the requested activity.

Permit No. _____ Department: _____

Applicable Directive: _____ Reviewed By: _____

_____ Date

Authority Representative