

Request For Waiver

I. Company/Aircraft Information:

Name of Company: _____

Mailing Address: _____
Street Address City/State Zip Code

Company Telephone No.: _____ Company Fax No.: _____

Purpose of Flight: _____

Check One: Inside Enhanced Class B Airspace _____ Outside Enhanced Class B Airspace _____

Please specify whether flight is Cargo, Passenger, or Both _____

Name and Telephone Number of Requestor: _____

Flight Itinerary: _____ **Include Dates * Please Attach***

Type of Aircraft _____ Aircraft Call Sign _____

State of Aircraft Registry & Tail No. _____

Aircraft Maximum Certified Takeoff Gross Weight: _____

II. Crew and Passenger Information: _____ *Please Attach*

Name, SSN, or Passport No. and Nationality of Crew Members and Passengers:

III. Affirmation: Requestor/Signator must affirm to each of the following:

(Please check (X) each criteria.)

- Access to the aircraft has been properly controlled by company representative(s).
- A senior company representative has verified the identity and authorization of each crewmember and passenger
- There are no unauthorized passengers on board the aircraft
- The purpose of the flight is accurately represented in Section I above.
- The aircraft will not deviate from the approved air traffic flight plan.

IV. SIGNATURE OF CORPORATE SECURITY DIRECTOR, COMPANY PRESIDENT OR EQUIVALENT.

Signature Title Date

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FOR FAA AIR TRAFFIC USE ONLY

Status/Authorization Code: _____

Thomas R. Davidson
Air Traffic Customer Advocate (202) 267-7232

Date

