TEAR OFF BEFORE USING

DEPARTMENT OF TRANSPORTATION FEDERAL AVIATION ADMINISTRATION

SUPPLEMENTAL INFORMATION

CERTIFICATION OF WAIVER OR AUTHORIZATION APPLICATION - PRIVACY ACT

The information on the accompanying form is solicited under authority of Federal Aviation Regulations Parts 91, 101, and 105.

Submission of the information is mandatory.

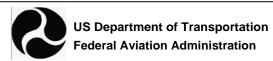
The purpose of this information is to establish eligibility for certificate of waiver or authorization

The data will be used for recordkeeping and statistical purposes.

Incomplete submission may result in delay or denial of your request.

FAA Form 7711-2 (8/08) Supersedes Previous Edition

DETACH THIS PART BEFORE USING



APPLICATION FOR CERTIFICATE OF WAIVER OR AUTHORIZATION

From Approved: O.M.B. No.2120-0027 01/31/2021				
APPLICANTS - DO NOT USE THESE SPACES				
Region	Date			
Action				
□ Approved □ Disapproved − "Explain under "Remarks"				
Signature of authorized FAA representative				

INSTRUCTIONS

Submit this application in triplicate (3) to any FAA Flight Standards district office.

Applicants requesting a Certificate of Waiver or Authorization for an aviation event must complete all the applicable items on this form and attach a properly marked 7.5 series Topographic Quadrangle Map(s), published by the U.S. Geological Survey (scale 1:24,000), of the proposed operating area. The map(s) must include scale depictions of the flightlines, showlines, race courses, and the location of the

fighting equipment. The applicant may also wish to submit photographs and scale diagrams as supplemental material to assist in the FAA's evaluation of a particular site. Application for a Certificate of Waiver or Authorization must be submitted 45 days prior to the requested date of the event.

Applicants requesting a Certificate of Waiver or Authorization for activities other than an aviation event will complete items 1 through 10 only and the certification, item 17, on the reverse

		courses, and the location of the e dispatch, ambulance, and fire		items 1 through 10 only and the certification, item 17, on the reverse.							
1. Name of organiza	ation		2.	Name of responsible	person						
Permanent mailing address	House numl	per and street or route number	City		State and ZIP code	Telephone No.					
4. State whether the applicant or any of its principal officers/owners has an application for waiver pending at any other office of the FAA.											
5. State whether the applicant or any of its principal officers owners has ever had its application for waiver denied, or whether the FAA has ever withdrawn a waiver from the applicant or any of its principal officers/owners.											
6. FAR section and number to be waived .											
		operation (Attach supplement if neede	ed)								
8. Area of operation (Location, altitudes, etc.)											
9a. Beginning (Date			ate and hour)								
10. Aircraft make and m	nodel			ome address eet, City, State) (d)							

ITEMS 11 THROUGH 16 TO BE FILLED OUT FOR AIR SHOW/AIR RACE WAIVER REQUESTS ONLY.											
11. The air event will be sponsored by:											
12. Permanent	House number ar	nd street or route number	City	State and ZIP code	Telephone No.						
mailing address											
13. Policing (Descrit	be provisions to be ma	ade for policing the event.)									
	•	· · · ·									
14 Emorgonov fooi	lition (Mark all that wi	II be available at time and place of air e	vont)								
14. Emergency raci	iilles (iviai'k ali tilat wi	ii be avaliable at time and place of all e	vent.)								
□ Physicia	ın	□ Fire truck	□ Other - Specify								
□ T Hysicia	111	- The truck	- Other - Opechy	_							
□ Ambular	nce	 Crash wagon 									
			 								
15. Air Traffic contro	l (Describe method of	controlling traffic, including provision for	arrival and departure of scheduled air	rcraft.)							
16. Schedule of Eve	ents (include arrival ar	nd departure of scheduled aircraft and or	her periods the airport maybe open.)							
Hour	Date		Event								
(a)	(b)		(c)								
If sufficient spa	ace is not available, the	e entire schedule of events may be subm	itted on separate sheets in the order	and manner indicated above							
		•	•								
Diagon Dood		ed applicant accepts full responsib									
Please Read		uthorization, and understands that above described operation.	the authorization contained in	such certificate will be strictly							
	illilited to the a	bove described operation.									
17. Certification -	I CERTIFY that th	e foregoing statements are true.									
Date	Signature of	Applicant									
Remarks											