


**Guide for Public Aircraft/Public Safety Completing the FAA Form 7711-2**  
**For use with 91.113(b) Waiver Application**  
**April 2025 v3**

This guide is to assist qualified Public Aircraft entities who are also Public Safety Organizations with completing the required FAA Form 7711-2. This form is a multi-purpose form, which is why the process here may differ from some of the instructions in the form.

**Submit the completed 7711-2 form and supporting documentation via email to: [9-AVS-AFS-750-91.113waivers@faa.gov](mailto:9-AVS-AFS-750-91.113waivers@faa.gov).** Do not submit this form to the FAA Flight Standards District Office.

No certificate may be issued unless a completed application form has been received (14 CFR 91. 101. and 105).

 US Department of Transportation Federal Aviation Administration  <b>APPLICATION FOR CERTIFICATE OF WAIVER OR AUTHORIZATION</b>	OMB Control Number: 2120-0027 / Expiration Date: 03/31/2024	
	<b>APPLICANTS - DO NOT USE THESE SPACES</b>	
	Flight Standards Office	Date
	Action <input type="checkbox"/> Approved <input type="checkbox"/> Disapproved – "Explain under "Remarks" Signature of authorized FAA representative	

<b>INSTRUCTIONS</b>	
Submit this application to [redacted]	[redacted]
[redacted]	[redacted]
[redacted]	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.

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1. Name of organization <b>Official Name of Agency seeking the waiver</b>		2. Name of responsible person <b>This is typically the Chief, Chief Pilot, or Aviation Section Manager</b>		
3. Permanent mailing address	House number and street or route number	City	State and ZIP code	Telephone Number
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. <b>If you have another waiver application pending, put the waiver or waiver application number here</b>				
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or any of its principal officers/owners has ever had its application for waiver denied, or whether the FAA has ever withdrawn a waiver from the applicant or any of its principal officers/owners. <b>Answer this item. If yes, explain why and attach supplement if needed</b>				
6. 14 CFR section and number to be waived <b>14 CFR 91.113(b)</b>				
7. Detailed description of proposed operation (Attach supplement if needed) <b>“See attached CONOP document” and attach it to your submission</b>				
8. Area of operation (Location, altitudes, etc.) Most will put “Nationwide Class G and Class E3/E4”. Some want to use their waiver inside airspace of specific airports, or their jurisdiction. If using a jurisdiction, attach a map. This depends on you to identify where you want to operate with this waiver.				
9a. Beginning (Date and hour) <b>Use your date of submission</b>		9b. Ending (Date and hour) <b>Use 48 months from your date of submission</b>		
10. Aircraft make and model (a)	Pilot's Name (b)	Certificate number and rating (c)	Home address (Street, City, State) (d)	
<b>“A current list of UAS and pilots operating under this waiver shall be maintained by the Proponent and available to the FAA upon request”</b>				

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Items 11-16 are not applicable for the PAO/PSO 91.113 waiver application. Leave them blank or answer "N/A". **Be sure to complete Item 17, dated and signed by the Responsible Person**

11. The air event will be sponsored by:			
12. Permanent mailing address	House number and street or route number	City	State and ZIP code Telephone Number
13. Parking (Describe provisions to be made in parking the event.)			
14. Emergency facilities (Mark all that will be available at time and place of air event.)			
<input type="checkbox"/> Physician <input type="checkbox"/> Fire truck <input type="checkbox"/> Other - Specify _____ <input type="checkbox"/> Ambulance <input type="checkbox"/> Aircraft rescue vehicle _____			
15. Air Traffic control (Describe method of controlling traffic, including provision for arrival and departure of scheduled aircraft.)			
16. Schedule of Events (include arrival and departure of scheduled aircraft and other periods when it may be operated.)			
Hour (a)	Date (b)	Event (c)	
Please Read > The undersigned applicant accepts full responsibility for the strict observance of the terms of the Certificate of Waiver or Authorization, and understands that the authorization contained in such certificate will be strictly limited to the above described operation.			
17. Certification - I CERTIFY that the foregoing statements are true.			
Date	Signature of Applicant		
<b>Responsible Person dates and signs here</b>			
Remarks			