



SCOTTSDALE AIRPORT AIRCRAFT STORAGE AGREEMENT NON-CITY OWNED



*Required for storage of aircraft in Non-City owned aircraft storage areas
(FBO's, TAC Private Hangars, etc.)*

Application for (check all that apply):

New

Change of Information

Applicant/ Business Name:	<input type="text"/>						
Authorized Representative:	<input type="text"/>	Email:	<input type="text"/>				
Work Phone:	<input type="text"/>	Cell:	<input type="text"/>	Fax:	<input type="text"/>		
Mailing Address:	<input type="text"/>			City:	<input type="text"/>		
State:	<input type="text"/>	Zip Code:	<input type="text"/>				
Billing Address:	<input type="text"/>			City:	<input type="text"/>		
State:	<input type="text"/>	Zip Code:	<input type="text"/>				
Billing Phone:	<input type="text"/>	Billing Email:	<input type="text"/>				
Aircraft Make / Model:	<input type="text"/>	Storage Location:	<input type="text"/>	FAA Regis No:	<input type="text"/>	Wing Span:	<input type="text"/>

The Applicant hereby requests the above action(s), and in consideration of this request being granted, agrees to the following:

- PERMIT LIMITATIONS:** This permit may not be assigned or transferred. Periodic inspections will be conducted to ensure that the assigned space is only occupied by the aircraft listed above.
- INFORMATION CHANGES:** The Applicant shall notify Airport Administration, in writing within fifteen (15) days, of any change to the information provided.
- RELEASE OF LIABILITY:** The City assumes no liability for damage or loss to personal property while operating at Scottsdale Airport. The applicant acknowledges and understands the aircraft wingspan limitations on the airport.

- 4. INDEMNIFICATION: The Applicant and invitees shall indemnify the City pursuant to Chapter 5 of the Scottsdale Revised Code.
- 5. COMPLIANCE WITH THE LAW: The Applicant shall comply with all applicable laws, ordinances, rules and regulations. To view regulations, go to <http://www.scottsdaleaz.gov/airport/regulatorydocs>.

The undersigned representative certifies he/she is authorized to sign for the business and acknowledges receipt of a copy of this permit.

Applicant Signature (Print Name):

Date/Time:

By checking this box, I affirm that the information entered above is accurate and that the name typed above represents my official signature.

Please submit the form with an electronic signature to airportops@scottsdaleaz.gov OR print, sign and return to 15000 N. Airport Drive, Suite 100, Scottsdale, AZ 85260

Staff Use Only

Application, permits and insurance reviewed by:

Aviation Director Comments / Stipulations:

Approved by Aviation Director or designee: