

Application for:

SCOTTSDALE AIRPARK ACCESS PERMIT



(Required of airpark based aircraft and airport service vehicles to use the airport/airpark access gates.)

Fields in RED are required fields.

Application for:			
☐ Aircraft Storage☐ Service/Government vehicle permit		☐ Access Device (\$50 f	
Applicant (Business Name):			
Authorized Representative, title:		Email Addr	ess:
Work Phone:	Cell Phone:	Fax:	
Mailing Address:			
City:	State:	Zip Code	:
Billing Address:			
City:	State:	Zip Code	:
Billing Phone:	Billing Email:		
Aircraft Hangar Address:			FAA Registration Number:
Aircraft/Vehicle Make/Model:			Aircraft Wingspan:

The Applicant hereby requests the above action(s) of the City to access the airpark with the above-described aircraft/service vehicle, and agrees to the following:

1. FEE PAYMENT: The Applicant agrees to pay all applicable fees on time, and all required fees including late fees, interest and penalties without deduction of any kind.

- 2. PERMIT LIMITATIONS: This permit may not be assigned or transferred. Aircraft gate access devices must be returned when the aircraft is no longer hangared at the location listed above.
- 3. INFORMATION CHANGES: The Applicant shall notify Airport Administration, in writing within fifteen (15) days, of any change to the information provided.
- 4. ACCESS DEVICES: Only City-owned aircraft gate access devices may be used for gate access. Aircraft gate access devices must be returned in good condition for refund of deposit. Applicant certifies they will return the access device when the aircraft is no longer based in the airpark.
- 5. RELEASE OF LIABILITY: The City assumes no liability for damage or loss to personal property while operating at Scottsdale Airport or in the airpark. The Applicant acknowledges and understands that airpark aircraft access gates and airpark taxilanes have varying maximum recommended wingspan limits.
- 6. INDEMNIFICATION: The Applicant and invitees shall indemnify the City pursuant to Chapter 5 of the Scottsdale Revised Code.
- 7. COMPLIANCE WITH THE LAW: The Applicant shall comply with all applicable laws, ordinances, rules and regulations.

To view regulations, go to http://ww	v.scottsdaleaz.gov/airport/regulatorydocs
The undersigned representative certifi	s he/she is authorized to sign for the business and acknowledges receipt of a copy of this permit.
Signature (type name):	Date/Time Field
represents my official signat	that the information entered above is accurate and that the name typed above re. Four documents, then submit via email to sferrara@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:	
Aeronautical Business Permit #:	Airpark Access Permit #:
Gate Access Device #:	Airpark Storage Location #:
Aviation Director's Comments/ Stipulations	
Approved by Aviation Director or designee:	