



24 Hr Phone 480.312.8478
24 Hr Fax 480.312.8470
Email: AirportOps@Scottsdaleaz.gov

Prior Permission Required (P.P.R.) Heavy Aircraft Operation (75,000 to 100,000 lbs.)

P.P.R.# _____ - _____
(Year) (3 digit #)

Tail # _____ Aircraft Type _____

Company Name _____ Phone # _____

Company Fax # _____

Pilot E-Mail Address _____

Date of P.P.R. Flight _____

Estimated P.P.R. Arrival Time _____
and/or

Estimated P.P.R. Departure Time _____

P.P.R. Arriving From Airport _____

P.P.R. Destination Airport From SDL _____

Approximate Takeoff Weight _____ lbs

Location: FBO: _____ Airpark: _____ Other: _____

****If operating to/from Atlantic Aviation, flight crews are required to taxi to/from the Alpha taxiway and/or parking apron via A4 or A5.**

P.P.R. Flight Confirmation (Aviation Staff Use Only)

Approved

Not Approved

P.P.R. Flight Took Place: Actual Date _____ Actual Time _____

P.P.R. Flight Cancelled: Date _____

Airport Operation Technician Initials _____