TEAR OFF BEFORE USING

DEPARTMENT OF TRANSPORTATION
FEDERAL AVIATION ADMINISTRATION

SUPPLEMENTAL INFORMATION

CERTIFICATION OF WAIVER OR AUTHORIZATION APPLICATION

Paperwork Reduction Act Statement: The information collected is reviewed and analyzed to determine the extent of the intended deviation from prescribed regulations. We estimate that it will take 0.75 hours to complete this form. Use of this form is not optional if a deviation from regulations is being requested. Confidentiality is not requested or provided. Please note that an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. The OMB control number associated with this collection is 2120-0027. Comments concerning the accuracy of this burden and suggestions for reducing the burden should be directed to the FAA at: 800 Independence Ave SW, Washington, DC 20591, Attn: Information Collection Clearance Officer, ABA-20.

DETACH THIS PART BEFORE USING

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

Form Approved: O.M.B. No. 2120-0027 03/31/2010

US Department of Transportation
Federal Aviation Administration

APPLICATION FOR CERTIFICATE OF WAIVER OR AUTHORIZATION

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 air event control point, Police dispatch, ambulance, and fire 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 8 only and the certification, item 15, on the reverse.

1. Name of organization	2. Name of responsible person

3. Permanent mailing address	House number and street or route number	City	State and ZIP code	Telephone No.

4. FAR section and number to be waived

5. Detailed description of proposed operation *(Attach supplement if needed)*

6. Area of operation *(Location, altitudes, etc.)*

7a. Beginning *(Date and hour)*	b. Ending *(Date and hour)*

8. Aircraft make and model (a)	Pilot's Name (b)	Certificate Number and rating (c)	Home address (Street, City, State) (d)

ITEMS 9 THROUGH 14 TO BE FILLED OUT FOR AIR SHOW/AIR RACE WAIVER REQUESTS ONLY.

9. The air event will be sponsored by:

10. Permanent mailing address	House number and street or route number	City	State and ZIP code	Telephone No.

11. Policing *(Describe provisions to be made for policing the event.)*

12. Emergency facilities *(Mark all that will be available at time and place of air event.)*

☐ Physician ☐ Fire truck ☐ Other - *Specify* _____

☐ Ambulance ☐ Crash wagon _____

13. Air Traffic control *(Describe method of controlling traffic, including provision for arrival and departure of scheduled aircraft.)*

14. Schedule of Events *(include arrival and departure of scheduled aircraft and other periods the airport may be open.)*

Hour (a)	Date (b)	Event (c)

If sufficient space is not available, the entire schedule of events may be submitted on separate sheets, in the order and manner indicated above.

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 strictlyl limited to the above described operation.

15. Certification - I CERTIFY that the foregoing statements are true.

Date	Signature of Applicant

Remarks