



INDEPENDENCE MUNICIPAL AIRPORT

GENERAL AVIATION OPERATOR PERMIT APPLICATION INSTRUCTIONS

To help the Independence Municipal Airport (Airport) make an informed decision, please complete all applicable (relevant) sections of this General Aviation Operator Permit Application (Application) and submit it (along with any additional information, data, and/or documentation pertinent to the Applicant and/or the activity) to the Airport.

Some of the questions in this Application may not apply to certain applicants or activities.

Commercial Applicants are expected to complete “all” sections of this Application.

It is expected that the Applicant will complete all applicable (relevant) sections of this Application to the best of the Applicant’s ability and the Applicant will include all pertinent information, data, and/or documentation in or with the application.

If any section or question is not applicable, the Applicant shall indicate N/A in the appropriate field.

Upon completion, the Application must be properly signed in ink by the Applicant or an authorized representative of the Applicant. In case of a conflict between words and numerals, the words, unless obviously incorrect, shall govern. Tables, charts, diagrams, graphics, photographs, and other exhibits may be attached to the Application if desired.

Return Application to:

City of Independence
C/O Airport Manager
331 1st Street East
Independence, IA 50644

or

Email: jon@walteraviation.com



SECTION 1 – GENERAL INFORMATION

1. Applicant’s Information

A. Type of request (check one):

- New Application
- Change Existing Application

B. Type of activity to be conducted (check all that apply):

- Full Services Fixed Base Operator (FSFBO)
- Limited Services Fixed Base Operator (LSFBO)
- Fixed Maintenance Services Operator (FMSO)
- Mobile Maintenance Services Operator (MMSO)
- Avionics Instruments Services Operator (AISO)
- Aircraft Rental Services Operator (ARSO)
- Flight Training Services Operator (FTSO)
- Aircraft Management Services Operator (AMSO)
- Aircraft Charter Services Operator (ACSO)
- Aircraft Storage Services Operator (ASTO)
- Other Aeronautical Services Operator (OASO) – please describe: _____

- Temporary Specialized Aviation Services Operator (TSASO) – please describe: _____

C. Type of Applicant:

- Lessee
- Sublessee*
- Temporary
- Mobile Maintenance

*If Sublessee, please provide written acknowledgment from Lessee (master tenant) that the Sublessee is authorized to conduct the permitted Activities in (or from) the subleased premises. Additionally, Lessee must acknowledge its responsibility to ensure the Sublessee complies with all applicable Regulatory Measures and applicable requirements of the Lessee. Subleases may require airport consent.

D. Location of operation:

If operation is proposed and has no address yet, please check this box

Address: _____

Address: _____

City: _____ State: _____ Zip: _____



E. Legal name: _____

Indicate Applicant's legal name exactly as it would appear in any legally binding document.

F. Business or trade name (if different from legal name): _____

G. Type of entity (check one):

- Sole proprietor
- Partnership
- Corporation
- Limited Liability Company
- Other (please identify): _____

H. Applicant's primary office (and contact information):

Name: _____

Title: _____

Address: _____

Address: _____

City: _____ State: _____ Zip: _____

Telephone 1: _____ Telephone 2: _____ Fax: _____

Email address: _____

I. Applicant's authorized representative (and contact information – if different from primary)

Identify Applicant's authorized representative (for official notices and communications).

Name: _____

Title: _____

Address: _____

Address: _____

City: _____ State: _____ Zip: _____

Telephone 1: _____ Telephone 2: _____ Fax: _____

Email address: _____



2. Applicant's Qualifications and Experience

Please answer the following questions as they apply to the Applicant (the entity).

A. Identify the number of years that Applicant has engaged in the activity to be conducted (as identified by the Applicant in SECTION 1 – GENERAL INFORMATION, 1. Applicant's Information.

a. Type of activity to be conducted: _____

b. Identify all airport land and/or improvements leased or subleased by the Applicant:

c. Identify all aviation businesses owned and/or operated by the Applicant (past and present): _____

B. Identify the name and location of the business (airport, city, and state) and the type of business owned and/or operated by the Applicant on a separate sheet and identify it as **Attachment 1**.

3. Permittee's Vehicle Operations

Select one of the following:

(Initial) _____ Permittee acknowledges that **no** vehicles owned by Permittee, its employees, contractors, subcontractors, customers, or invitees will be driven on any ramp(s) in the course of Permittee's Operations under this Permit and acknowledges that its vehicles as described above will remain outside of the Airport's fenced perimeter at all times.

(Initial) _____ Permittee acknowledges that vehicles owned by Permittee, its employees, contractors, subcontractors, customers, or invitees will be driven on the ramp(s) in the course of Permittee's Operations under this Permit however, all driving is **confined** to the respective Permittee's leased or subleased areas.

(Initial) _____ Permittee acknowledges that vehicles owned by Permittee, its employees, contractors, subcontractors, customers, or invitees will be driven off of the Permittee's respective leased or subleased areas **within** the Airport secured perimeter.



SECTION 2 – LAND AND/OR IMPROVEMENTS

1. Proposed Property for Aeronautical Activity

- A. Identify the proposed property on the attached Aerial Photograph (pg. 6)
- B. Provide a preliminary drawing identifying the land and existing Improvements (and the square footage of the land and existing Improvements) Applicant is desirous of leasing – attach and identify as **Attachment 2**.
- C. Describe the existing Improvements Applicant is desirous of leasing.
- D. Provide a drawing identifying the hangar, office, customer, bathroom, shop, aircraft storage space, Apron, tiedown, parking spaces, and any other Improvements required in the Airport's Minimum Standards Program. Identify the square footage of each area identified in the drawing. Attach and identify as **Attachment 3**.

2. Identify the largest Aircraft that will be serviced by the Operator

Note: Apron size and weight bearing capacity must be sufficient for the proposed Activity based upon FAA design standards. Any deviation from FAA design standards shall be reviewed and approved by the Manager.

