Airport Lic.

STATE OF CONNECTICUT

DEPARTMENT OF TRANSPORTATION

BUREAU OF AVIATION & PORTS 2800 BERLIN TURNPIKE, P.O. BOX 317546 NEWINGTON, CONNECTICUT 06131-7546

Original	{	}
Renewal	{	}



APPLICATION FOR AIRPORT/HELIPORT LICENSE

Name of field	
Town	County
Name of managerSocial Security Number or Federal Employer Identification	
Mailing address of field	
Type of field	Telephone No
Check below with an (X) the facilities, supplies and equiprinformation required.	ment available at the field. Complete any additional
() Wind direction indicator – Type	
() Facilities for supplying aviation fuel – Octane oil, fuel dispenser (pump, tank, etc.)	
() Telephone – Location	
() Drinking water	() Sanitary public toilets
() Approved fire extinguishers at:	() in hangars - type:
() Map posted showing airport traffic pattern	
() Sufficient chocks with ropes	_() tiedown ropes
() Copies of Connecticut Laws and Regulations Governing	Aeronautics
If this is a seaplane base , check below with an (X) the equi	pment available.
() Life preserver of the ring type with rope	
() Boat	() dock or float
() Ramp or beaching facilities	() heaving lines
I certify that the above statements and information are tro- belief, and that the land in question is either owned by me same. I certify that the licensed facility shall comply wit regulations during the licensing period.	or I have secured the necessary permission to use
Signature	Date
Title	_