



PALM BEACH INTERNATIONAL AIRPORT
OPERATING PERMIT APPLICATION FORM

Air Transportation Companies requesting to conduct business at the Palm Beach International Airport (“Airport” or “PBI”) on an on-demand or short term basis are required to obtain an Operating Permit.¹ Air Transportation Companies may schedule up to a maximum of six flight operations per Operating Permit. For purposes of an Operating Permit, a flight operation consists of one aircraft landing and takeoff. An Operating Permit may be issued no more than three times per calendar year. Air Transportation Companies requesting more than three Operating Permits in a single calendar year shall be required to obtain a non-signatory airline agreement. In order to be issued an Operating Permit, an Air Transportation Company must complete and submit the following items by fax, mail or e-mail to:

Palm Beach County Department of Airports
Properties Division
846 Palm Beach International Airport
West Palm Beach, FL 33406-1470
Phone: (561) 471-7403
Fax: (561) 471-7427
E-mail: ray.walter@pbia.org

1. **Completed Operating Permit Application Form.**
2. **Evidence of Insurance**
See paragraph 5 of Operating Permit for required insurance coverage types and amounts.
3. **Air Carrier Certificate**
Air Transportation Companies must provide a copy of their Air Carrier Certificate issued by the Federal Aviation Administration.
4. **Operating Permit**
Complete an Operating Permit when flight and operational issues are confirmed.

An estimate of applicable fees and charges will be provided to the applicant following receipt of the above-referenced information. Estimated fees and charges must be submitted in advance of each flight operation. In the event of a flight cancellation unrelated to weather or other emergency condition, fees and charges for the cancelled flight that were paid in advance will be refunded upon request. Voluntary flight cancellations shall be subject to a fifty percent (50%) refund provided that the Department of Airports has been given no less than 48 hours prior written notice of the cancellation. Voluntary flight cancellations occurring with less than 48 hours prior written notice shall not be eligible for a refund.

Usage of gate and ticket counter locations shall be coordinated through the Department of Airports Operations and Properties Divisions no less than 15 days in advance of each flight operation. Air Transportation Companies shall be responsible for providing all necessary equipment for its flight operations, including, but not limited to, baggage scales and computer equipment.

Additional information may be required upon request of the Department of Airports.

¹ An Operating Permit is not required for flight operations conducted at fixed base operator general aviation facilities.

PALM BEACH INTERNATIONAL AIRPORT
OPERATING PERMIT APPLICATION FORM

1. Air Transportation Company Information:	2. Contact Person:		
<p>Company Name: _____ <i>(as it will appear on the Operating Permit)</i></p> <p>Company Address: _____ _____ _____ _____</p> <p>Phone: _____</p> <p>Fax: _____</p>	<p>Name: _____</p> <p>Title: _____</p> <p>Address: _____ _____ _____</p> <p>Phone: _____</p> <p>Mobile: _____</p> <p>Fax: _____</p> <p>Email: _____</p>		
3. Ground Handler Contact Information:			
<p>Ground Handler : _____</p> <p>Contact for Ground Handler: _____ Phone: _____</p> <p>E-mail: _____</p>			
4. Description of Proposed Flight Operations:			
<p>Provide a detailed description of proposed flight operations and proposed facility use, including dates and times of arrival and departure on Attachment "A".</p>			
5. Business Information:			
<table style="width: 100%; border: none;"><tr><td style="width: 50%; vertical-align: top;"><p>Form of Business Entity:</p><p><input type="checkbox"/> Individual</p><p><input type="checkbox"/> Partnership</p><p><input type="checkbox"/> Limited Liability Company</p></td><td style="width: 50%; vertical-align: top;"><p>State where Organized: _____</p><p><input type="checkbox"/> Corporation</p><p><input type="checkbox"/> Joint Venture</p><p><input type="checkbox"/> Other – not listed above _____</p></td></tr></table>		<p>Form of Business Entity:</p> <p><input type="checkbox"/> Individual</p> <p><input type="checkbox"/> Partnership</p> <p><input type="checkbox"/> Limited Liability Company</p>	<p>State where Organized: _____</p> <p><input type="checkbox"/> Corporation</p> <p><input type="checkbox"/> Joint Venture</p> <p><input type="checkbox"/> Other – not listed above _____</p>
<p>Form of Business Entity:</p> <p><input type="checkbox"/> Individual</p> <p><input type="checkbox"/> Partnership</p> <p><input type="checkbox"/> Limited Liability Company</p>	<p>State where Organized: _____</p> <p><input type="checkbox"/> Corporation</p> <p><input type="checkbox"/> Joint Venture</p> <p><input type="checkbox"/> Other – not listed above _____</p>		

**PALM BEACH INTERNATIONAL AIRPORT
OPERATING PERMIT APPLICATION FORM**

6. Other Information:

Provide any other information pertinent to the proposed operations at the Airport.

7. Signature of Applicant/Permittee

The undersigned Applicant/Permittee certifies that the information contained herein is complete and correct. Applicant/Permittee expressly acknowledges that false information given by Permittee relating to the requested Permit shall constitute a violation of the Permit by Permittee.

Signature of Applicant/Permittee

Title

Date

ATTACHMENT "A"
DESCRIPTION OF PROPOSED FLIGHT OPERATIONS

Flight Operation #1:
Arrive PBI Date: _____ Time: _____ Origin: _____ Destination: _____
Depart PBI Date: _____ Time: _____ Origin: _____ Destination: _____
Terminal Usage:
Per Use Ticket Counter: <u>Yes</u> <u>No</u> Estimated time of usage: _____
Aircraft Information:
Name of Aircraft Operator: _____
Aircraft Description: _____
Maximum Gross Landing Weight: _____
Estimated Number of Passengers: _____
Flight Operation #2:
Arrive PBI Date: _____ Time: _____ Origin: _____ Destination: _____
Depart PBI Date: _____ Time: _____ Origin: _____ Destination: _____
Terminal Usage:
Per Use Ticket Counter: <u>Yes</u> <u>No</u> Estimated time of usage: _____
Aircraft Information:
Name of Aircraft Operator: _____
Aircraft Description: _____
Maximum Gross Landing Weight: _____
Estimated Number of Passengers: _____

ATTACHMENT "A"
DESCRIPTION OF PROPOSED FLIGHT OPERATIONS

Flight Operation #3:
Arrive PBI Date: _____ Time: _____ Origin: _____ Destination: _____
Depart PBI Date: _____ Time: _____ Origin: _____ Destination: _____
Terminal Usage:
Per Use Ticket Counter: <u>Yes</u> <u>No</u> Estimated time of usage: _____
Aircraft Information:
Name of Aircraft Operator: _____
Aircraft Description: _____
Maximum Gross Landing Weight: _____
Estimated Number of Passengers: _____
Flight Operation #4:
Arrive PBI Date: _____ Time: _____ Origin: _____ Destination: _____
Depart PBI Date: _____ Time: _____ Origin: _____ Destination: _____
Terminal Usage:
Per Use Ticket Counter: <u>Yes</u> <u>No</u> Estimated time of usage: _____
Aircraft Information:
Name of Aircraft Operator: _____
Aircraft Description: _____
Maximum Gross Landing Weight: _____
Estimated Number of Passengers: _____

ATTACHMENT "A"
DESCRIPTION OF PROPOSED FLIGHT OPERATIONS

Flight Operation #5:
Arrive PBI Date: _____ Time: _____ Origin: _____ Destination: _____
Depart PBI Date: _____ Time: _____ Origin: _____ Destination: _____
Terminal Usage:
Per Use Ticket Counter: <u>Yes</u> <u>No</u> Estimated time of usage: _____
Aircraft Information:
Name of Aircraft Operator: _____
Aircraft Description: _____
Maximum Gross Landing Weight: _____
Estimated Number of Passengers: _____
Flight Operation #6:
Arrive PBI Date: _____ Time: _____ Origin: _____ Destination: _____
Depart PBI Date: _____ Time: _____ Origin: _____ Destination: _____
Terminal Usage:
Per Use Ticket Counter: <u>Yes</u> <u>No</u> Estimated time of usage: _____
Aircraft Information:
Name of Aircraft Operator: _____
Aircraft Description: _____
Maximum Gross Landing Weight: _____
Estimated Number of Passengers: _____