

**REPUBLIC AIRPORT**  
**PRIOR PERMISSION REQUEST**  
**HAZARDOUS MATERIALS**

Please fill out the following information and return to Republic Airport. If you are requesting permission for multiple flights, include a complete flight schedule. Direct your request to:

Assistant Airport Manager  
7150 Republic Airport, Suite 216  
East Farmingdale, NY 11735-3930

Phone: (631)-752-7707 x6110  
Fax: (631)-293-1429  
*Please Contact Operations Dept*  
During Non-Business Hours - Available  
24 Hrs: (631)-752-7707 x6108

All pertinent information about the cargo will be secured at the time of notification.

\* Please include all MSDS.

A) Estimated time of arrival \_\_\_\_\_ Date: \_\_\_\_\_  
Estimated time of departure \_\_\_\_\_ Date: \_\_\_\_\_

B) Type of cargo (dynamite, black powder, blasting caps, etc.) and amount.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

C) Aircraft transporter

Name: \_\_\_\_\_ Telephone #: \_\_\_\_\_  
Address: \_\_\_\_\_  
Type of aircraft: \_\_\_\_\_ Registration #: \_\_\_\_\_  
Contact Person: \_\_\_\_\_

D) Pilot

Name: \_\_\_\_\_ License #: \_\_\_\_\_  
Address: \_\_\_\_\_

E) Number of persons on board: \_\_\_\_\_

F) Shipper

Name: \_\_\_\_\_ Telephone #: \_\_\_\_\_  
Address: \_\_\_\_\_  
Contact Person: \_\_\_\_\_

G) Receiver

Name: \_\_\_\_\_ Telephone #: \_\_\_\_\_  
Address: \_\_\_\_\_  
Contact Person: \_\_\_\_\_

For additional information, refer to Airport Rules & Regulations.  
Republic Airport — Part 1012, Section 1012.3

Assistant Airport Manager \_\_\_\_\_ Date \_\_\_\_\_