REPUBLIC AIRPORT
PRIOR PERMISSION REQUEST
HAZARDOUS MATERIALS

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

Assistant Airport Manager    Phone: (631) 752-7707, x6109
7150 Republic Airport, Room 216    Email: info@republicairport.net
East Farmingdale, NY 11735    Fax: (631) 293-1429
Website: www.republicairport.net    During non-business hours, please contact our
East Farmingdale, NY 11735    24-hour Operations Dept. at: (631) 386-6108

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: ___________________________    Email: ____________________________
   Type of aircraft: ____________________    Registration #: ____________________
   Contact Person: _______________________    ______________________

D) Pilot

   Name ____________________________________    License #: ________________________
   Address: __________________________________

E) Number of persons on board: _____________

F) Shipper

   Name: _________________________________    Telephone #: ________________________
   Address: _______________________________
   Contact Person: _______________________    Email: ____________________________

   Receiver

   Name: _________________________________    Telephone #: ________________________
   Address: _______________________________
   Contact Person: _______________________    Email: ____________________________

For additional information, refer to Airport Rules & Regulations (Republic Airport-Part 1012, Section 1012.3)

Assistant Airport Manager ___________________________ Date ____________________