

100 EAST BROADWAY, MONMOUTH, IL 61462 (309) 734-2141

COMMERCIAL LIMITED AERONAUTICAL SERVICE OPERATION PERMIT APPLICATION

| Business Name | | | | | |
|---|---|-----|--------------------------------|---|--|
| Business Address | | | | | |
| Contact Name | | | | | |
| Contact Phone | | | | | |
| | Contact Email | | | | |
| Tyne | e of business (check all that apply): | | | | |
| .,,,, | Aerial Agricultural Application | | Skydiving | | |
| | Fixed Base Operator (FBO) | | Air Taxi | | |
| | Fuel Sales | | Other (please specify: |) | |
| Aerial applicators: (1) You must provide a copy of the applicator's FAR Part 137 Certificate to the city; (2) You must provide a copy of their Applicators Agri-Chemical Facility Permit for the State of Illinois; (3) Chemical containment must be provided for the quantity of chemicals that the operational aircraft is capable of holding; (4) The person, firm or corporation must pay the City an operating fee of \$50 per day for aerial application operations (whether those operations are a full or partial day). If dispensing fuel for commercial sale, provide the following: (1) Available personnel for dispensing of fuel during the hours beginning at 8:00 a.m. and ending at 4:00 p.m. (2) Provide the city a fuel flowage fee of \$0.07 per gallon | | | | | |
| Dura | ation of Permit - for fiscal year beginning N | Иау | 1, 20, and ending April 30, 20 | | |
| Total Amount paid: | | | | | |
| Siar | nature of Applicant | | Date: | | |
| oigi | Signature of Applicant: Date: | | | | |

RETURN TO CITY HALL WITH PERMIT FEE AND ALL REQUIRED DOCUMENTS revised 6/30/15