



State of Vermont
PERMIT AND LICENSE INFORMATION

AIRPORT AERIAL PERMITS (on or off airport)

**SUMMARY
DESCRIPTION
OF PERMIT**

Activities requiring Agency approval:

Aerial spraying. Airplane or helicopter agricultural application. Please fill out form below.

Parachute exhibitions. Parachute jumps for compensation. Contact AOT Aviation at Evan.Robinson@vermont.gov

Airshows. Organized air shows including aerobatic maneuvers and parachute jumping. Contact AOT Aviation at Evan.Robinson@vermont.gov

AOT Approval indicates compliance with all statutory requirements and minimum safety standards.

**CRITERIA FOR
JURISDICTION**

Aerial spraying permit requires a certificate from VT Department of Agriculture. Parachute exhibition permit requires written municipal approval, and notification to FAA. Air show permit requires a Certificate of Waiver from FAA

**INFORMATION
REQUIRED**

For aerial spraying, completed application form noting areas to be sprayed and list of approved chemicals.

For Parachute permits completed application form including correspondence from the appropriate town Recreation and Parks director or equivalent indicating municipal approval.

For an air show, completed application form, diagram of proposed aerobatic performance area, completed copy of FAA Form 7711-2 as filed with the FAA and must possess and have available for inspection the Certificate of Waiver from FAA.

FEES

None

**VT AGENCY OF TRANSPORTATION
POLICY, PLANNING, AND INTERMODAL
DEVELOPMENT DIVISION
- AVIATION SECTION -**

CONTACT: Evan Robinson, Aviation Manger
Email: Evan.Robinson@vermont.gov
Phone: (802) 279-7146

ADDRESS: 219 North Main Street Barre,
VT 05641

APPLICATION TIME 30 Days
FRAME
ADMINISTERING AGENCY

AUTHORITY 5 V.S.A. § 421

APPLICABLE Letter of instructions issued on request.
RULES

APPEAL Interested parties may appeal within 30 days of decision
PROCESS



State of Vermont
PERMIT AND LICENSE APPLICATION
Phone: (802) 828-1735 Fax: (802) 828-3938

ON – OFF -AIRPORT AERIAL PERMITS

Evan Robinson, Aviation Manger
Email: Evan.Robinson@vermont.gov
Phone: (802) 279-7146

SPRAY

APPLICATION

1. Name of Applicant:

2. Address:

3. Telephone: Fax:

4. Who Should We Contact if Necessary

5. Aircraft to be used. Make / Model: N-Number:
Color:

How?:

6. Pilot Roster. Please list all pilots to fly sorties:

<input type="text"/>	a. Name:Type	<input type="text"/>
	Airman Certificate:	
<input type="text"/>	b. Name:Type	<input type="text"/>
<input type="text"/>	Airman Certificate:	
<input type="text"/>	c. Name:Type	<input type="text"/>
		<input type="checkbox"/> Yes <input type="checkbox"/> No
	d. Name:Type Airman Certificate:	

7. Are you proposing to stage operations at a Vermont State Owned Airport?:

8. If yes, which airport:

9. Do you hold the required minimum liability insurance to operate from this airport?

10. Have you applied for and received the required certificate from the Vermont Agency of Agriculture listing chemicals to be applied? Yes No Is it attached?: Yes No

11. Does your company have in their possession currently effective pesticide applicator or pesticide

operator's licenses, as applicable? Yes No

12. Are you and all listed pilots familiar with all applicable Local and State regulations and/or Statutes

pertaining to aerial spraying? Yes No

13. Are you and all listed pilots familiar with 14 CFR Part 91 and Part 137, as applicable?:

Yes No

Signature:

Name (printed):

Date:

Yes No
