Spray Permit and License Information Page 1 of 4



State of Vermont PERMIT AND LICENSE INFORMATION

AIRPORT AERIAL PERMITS (on or off airport)

SUMMARY DESCRIPTION OF PERMIT

Activities	requiring	Agency	approval:
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Aerial spraying. Airplane or helicopter agricultural application. Please fill out form bellow.

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 RULES	Letter of instructions issued on request.
APPEAL PROCESS	Interested parties may appeal within 30 days of decision



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

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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: Email:				
4.	Who Should We Contact if Necessary				
5. Ho	Aircraft to be used. Make / Model: N-Number: Color: //				
6.	Pilot Roster. Please list all pilots to fly sorties: Airman Certificate:				
a.	Name:				
b.	Name:				
C.	Name:				
7.	Are you proposing to stage operations at a Vermont State Owned Airport?: Yes No				

8. If yes, which airport:

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9. Do you hold the required minimum liability insu					
Yes No					
10. Have-you applied for and received the require	ed certificate from the Vermont Agency of				
Agriculture listing chemicals to be applied?	Yes No Is it attached?:				
11. Does your company have in their possessio pesticide operator's licenses, as applicable? Yes No					
12. Are you and all listed pilots familiar with all Statutes pertaining to aerial spraying?	I applicable Local and State regulations and/or				
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:					