

---

**POLICY, PLANNING & INTERMODAL DEVELOPMENT DIVISION  
AVIATION PROGRAM OFFICE**

[evan.robinson@vermont.gov](mailto:evan.robinson@vermont.gov) Telephone: (802) 279-7146

**Vermont Aeronautics Waiver Request**

**Request for One Time Authorization of Airport Operation for  
Exceeding Weight Limit for Landing and Takeoff.**

Aircraft Serial Number: \_\_\_\_\_ Aircraft Registration Number: \_\_\_\_\_  
Airport Identifier: \_\_\_\_\_  
Airport Wt. Limit Single Wheel: \_\_\_\_\_ Double Wheel: \_\_\_\_\_  
Date of Landing: \_\_\_\_\_ Aircraft Gross Wt.: \_\_\_\_\_  
Date of Takeoff: \_\_\_\_\_ Aircraft Gross Wt.: \_\_\_\_\_  
Requester's Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Phone Number: \_\_\_\_\_ Alternate Phone Number: \_\_\_\_\_  
Remarks:

Requester to initial following paragraphs:

\_\_\_\_\_ I certify that I understand this is not blanket authorization for runway operations and only applies towards one-time landing and/or takeoff for the aircraft named above. I understand that this waiver authorization is valid for the date(s) specified and is cancelled if the date(s) and/or aircraft changes. If approved, this does not constitute a change in airport category and all design standards for the airport remain in place.

\_\_\_\_\_ I understand that I enter this agreement at my own risk and agree to be responsible for any damage overweight or oversize aircraft may cause as a result.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Approving Authority: \_\_\_\_\_

cc: Aero files – weight waivers