



**Temporary Heliport Application**

<b>Please complete all applicable sections. Return the the Bureau of Aeronautics at the above address or email address. Receipt of this application is required at least ten (10) business days prior to the scheduled event.</b>	
<b>General Event Information:</b>	<b>Temproary Heliport Information:</b>
Event Name	Location of Landing Area
Physical Address	Physical Address
Town/Zip Code	Town/State/ZIP
Event Contact Name	Latitude
Phone Number	Longitude
Email Address	Surface Type (pavement, turf, water, other)
<b>Helicopter Operator Information:</b>	<b>Property Owner Approval:</b>
Company Name	Property Owner Name or Municipal Office
Contact Name	I, the undersigned, do hereby allow and approve of this property as a temporary heliport for this event.
Address	
Town/Zip Code	Signature
Event Contact Name	Date
Phone Number	Property Owner Phone Number
Email Address	Property Owner Email Address
<b>Pilot Information:</b>	<b>Helicopter Information:</b>
Pilot #1 Name	Helicopter Make/Model
Pilot Phone Number	Registration Number
FAA Airmen Certificate Number	Helicopter Owner
FAA Pilot Certification Type and Rating	Overall Length
Pilot #2 Name	Rotor Diameter
Pilot Phone Number	Minimum FATO to be Used During Event
FAA Airmen Certificate Number	<b>PLEASE ATTACH LOCAL AREA MAP &amp; SITE DIAGRAM</b>
FAA Pilot Certification Type and Rating	

\*please attach any additional pilot information to this application.

**Statement of Responsibility**

I, the undersigned, certify that I am responsible for the activities of all pilots and all aircraft associated with this event and further certify that the rules and regulations governing commerical flight activities as set forth but the NHDOT/Bureau of Aeroautices and the Federal Aviation Administration will be strictly observed and adhered to.

Signature of Applicant \_\_\_\_\_

Date \_\_\_\_\_