

**TEMPORARY CLOSURE FOR NON-AERONAUTICAL  
SPECIAL EVENT REQUEST****I. APPLICANT INFORMATION**

Airport Name:	
Airport Sponsor/Manager/Representative:	
Phone Number:	Email:
Mailing Address (Street/P O Box):	
City, ST ZIP Code:	Is the airport in the NPIAS? Yes: <input type="checkbox"/> No: <input type="checkbox"/>

**II. SPECIAL EVENT INFORMATION**

Event Name:		Event Date(s):		Event Time(s):			
Event Description:							
Primary Contact:		Phone No.:		Secondary Contact:		Phone No.:	
Airport Closure:	Full: <input type="checkbox"/> Partial: <input type="checkbox"/> None: <input type="checkbox"/>	Runway Closures:	Yes: <input type="checkbox"/> No: <input type="checkbox"/>	Taxiway Closures:	Yes: <input type="checkbox"/> No: <input type="checkbox"/>		
Please Specify Which Runways and/or Taxiways:							
Is the runway the primary or secondary runway? Primary: <input type="checkbox"/> Secondary: <input type="checkbox"/>							

**III. SUPPORTING DOCUMENTATION**

The following items related to the special event have been thoroughly addressed and have been submitted as part of this request:	
• A summary of the overall special event including a sketch map depicting the location of the event.	<input type="checkbox"/>
• Event and closure justification.	<input type="checkbox"/>
• Describe how financial or other benefits will accrue to the airport and local community.	<input type="checkbox"/>
• Describe how the event and closure will not adversely affect aviation activity at the facility.	<input type="checkbox"/>
• Describe how the event and closure is supported by all aeronautical tenants and local airport users.	<input type="checkbox"/>
• Describe adequate safety and security procedures that will be in place during the event.	<input type="checkbox"/>
• Describe precautions that will be in place to prevent damage to airport facilities and equipment.	<input type="checkbox"/>
• Provide a copy of all FAA reviews, certifications, and approvals (as applicable).	<input type="checkbox"/>
• Confirmation that all appropriate NOTAMs will be issued (as applicable).	<input type="checkbox"/>
<b>Supporting documentation can be sent electronically to the appropriate FDOT District Aviation Office</b>	

**V. CERTIFICATION**

I hereby certify that the information provided to support the proposed request is true and correct and does not violate any Federal and State grant assurances and that failure to comply with these assurances, as well as that required for non-aeronautical use approval, will affect my ability to compete for future airport development funding.

BY:

(Duly Authorized Representative of Sponsor)

Event Date

Today's Date

Printed Name

Title

Contact Phone Number

E-mail address



## TEMPORARY CLOSURE FOR NON-AERONAUTICAL SPECIAL EVENT REQUEST

### REFERENCES:

- A. FAA Order 5190.6B – Airport Compliance Manual.
- B. Florida Department of Transportation (FDOT) Public Transportation Joint Participation Agreement (JPA), Aviation Program Assurances.

### TEMPORARY CLOSURE FOR NON-AERONAUTICAL USE REQUEST INSTRUCTIONS:

#### Applicant Information

1. Enter the name, mailing address, phone number and email address of the airport sponsor/manager/representative submitting the request.
2. Document if the airport is federally-obligated and in the NPIAS.

#### Event Information

1. Enter the name and complete description of the event proposed at the airport.
2. Document whether a runway or taxiway must be closed anytime during this event, specify which runways and taxiways, and specify if the proposed closed runway is the primary or secondary runway.

#### Supplemental Information

1. *A summary of the overall event.* The name of the event and the overall purpose of the event.
2. *A sketch map.* The sketch map should show affected locations on the airport, location of emergency personnel and services, and physical controls measures to be in place.
3. *Describe why the event/activity must take place at the airport.* Confirm that an objective evaluation of comparable venues has been conducted and no other venues exist within the community to reasonably accommodate the event.
4. *Describe how financial or other benefits will accrue to the airport and local community.* Briefly describe the financial and/or other benefits that will positively affect the airport and aviation as a result of the event.
5. *Describe how the event and closure will not adversely affect aviation activity at the facility.* Briefly describe all reasonable accommodations that have been made to maintain normal airport operations and how tenants will not be adversely affected by the event.
6. *Describe how the event and closure is supported by all aeronautical tenants and local airport users.* Confirm that all aeronautical tenants and local airport users have been notified of the planned closure and have been given the opportunity to comment, and the event and closure is supported by the airport tenants and the community at large. A copy of such notification, comments and support should be provided.
7. *Describe adequate safety and security procedures that will be in place during the event.* Briefly describe the procedures that will be in place to ensure the safety and security of concurrent aircraft and airport operations, and to ensure the safety for event officials and staff, participants, and spectators. The airport and/or event promoters/coordinators/organizers shall obtain adequate insurance to protect the airport from damages, injuries and lawsuits arising from the conduct of the event.
8. *Describe precautions that will be in place to prevent damage to airport facilities and equipment.* Briefly describe what precautions will be in place to prevent damage to airport facilities, equipment and navigational aids (pavements, lights, NAVAIDs, etc.), and all damage to airport facilities occurring during the conduct of the event will be repaired quickly and by event promoters/coordinators/organizers to the satisfaction of the airport.
9. *FAA reviews and certifications (if applicable).* All NPIAS airports are to provide copies of all FAA-related documentation related to the event.
10. *NOTAMS.* Confirm that all NOTAMs will be issued as appropriate.

#### Certification

1. The airport sponsor, or authorized agent for the sponsor, must sign and date the application. Print or type the signatory's name. If appropriate list the signatory's title.
2. Forward this application along with the required supplemental information to the appropriate FDOT District Aviation Office.

**For questions about this Application or special event compliance, please contact your appropriate FDOT District Aviation Office.**