



STATE OF CONNECTICUT
DEPARTMENT OF TRANSPORTATION
BUREAU OF AVIATION & PORTS
2800 BERLIN TURNPIKE, P.O. BOX 317546
NEWINGTON, CONNECTICUT 06131-7546

APPLICATION FOR APPROVAL OF PROPOSED PARACHUTE JUMP CENTER

Application is hereby made for approval of a proposed parachute jump center:

1. (a) Name of applicant _____
(b) Address of applicant _____
(c) Telephone number _____
2. Location of site _____
3. General description of site and surroundings. (Attach additional pages, if necessary.) **SUBMIT A CLASS "D" SURVEY WITH APPLICATION SHOWING SIZE, PROPOSED LAYOUT, OBSTRUCTIONS, PROPERTY LINES, RUNWAYS, BUILDINGS, DROP ZONE, DROP ZONE AREA, TARGET POINT, ETC.**

4. Name and address of property owner _____

5. Is property to be purchased or leased? _____
6. Types of Proposed Operations _____

7. No fee required.

I am familiar with Connecticut regulations and federal requirements relating to the establishment of parachute jump centers.

Signature of Applicant

Date