

Patrick Leahy Burlington Intl Airport Non-Commercial Self Fueling Permit



Applicant: _____

Authorized Representative: _____ Title _____

Aircraft Storage Location/Hangar Address: _____

Aircraft to be fueled (List Type & N Number, provide on separate page if necessary): _____, _____, _____

Employee(s) Certified to Fuel Aircraft: _____, _____, _____

Name of Fuel Safety Supervisor Training Course: _____ Date of Completion: _____

Type of Fueling System: Refueler Fuel Tank

Fuel to be Dispensed and Quantity: Jet-A _____ 100LL _____ Other _____

Location of Fueling Station/s: _____

FEE PAYMENT: Applicant shall pay the monthly fuel flow fee on time for fuel dispensed into aircraft owned or leased by the applicant, and all required fees including late fees, interest and penalties.

PERMIT LIMITATIONS:

A. This Permit may not be assigned or transferred. B. A holder of a Self-Fueling Permit shall not dispense or permit the dispensing of aircraft fuels into aircraft that are not owned or leased by the applicant. C. This permit shall remain in effect annually unless otherwise suspended, relinquished or revoked.

INFORMATION CHANGES: The Applicant must notify the Director of Aviation in writing within ten (10) days of any changes to the information provided on this form.

COMPETENCY: The Applicant certifies that the personnel engaged in self-fueling are properly trained in aircraft fueling, fuel handling and associated safety procedures, and will conform to the best practices for such operations.

REPORTING: The Applicant shall provide evidence of compliance to the Director of Aviation upon request at any time and as part of any application for a Self-Fueling Permit.

SELF-FUELING RULES AND REGULATIONS: The Applicant certifies that he or she has read and understands the Airport's Self-Fueling Policy regarding Non-Commercial Self-Fueling and acknowledges receipt of a copy of these Rules and Regulations. The undersigned representative certifies he/she is authorized to sign for this permit and shall comply with all the provisions of the Airport Rules and Regulations and the Minimum Standards. Any violation or failure to comply with the above requirements will result in this permit being cancelled at the options of the Director of Aviation.

Signature and Date Signed

Print Name

Non Commercial Self Fueling Permit

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|---|---|
| <input type="checkbox"/> Airport Administration Only | <input type="checkbox"/> Handheld Fire Extinguisher Records |
| <input type="checkbox"/> Insurance Certificate(s) | <input type="checkbox"/> Permits |
| <input type="checkbox"/> Spill Prevention Contingency and Control Plan (SPCC) | <input type="checkbox"/> Lease(s) on file for fuel storage tank and mobile fueller parking area |
| <input type="checkbox"/> Standard Operating Procedures/Quality Control Plan | <input type="checkbox"/> Facilities Inspection Conducted |
| <input type="checkbox"/> Construction Safety and Phasing Plan | <input type="checkbox"/> Proof of Aircraft Ownership or copy of Lease |
| <input type="checkbox"/> Certificate of Complete of Fuel Safety | <input type="checkbox"/> Employee(s) I-9 |
| <input type="checkbox"/> Supervisor Training | <input type="checkbox"/> Applicant billed |
| <input type="checkbox"/> Line Fuel Service Training Records | |

Approved By (Name and Date): _____ Title: _____

Application Denied ____ Reason _____