



U.S. Department  
of Transportation

**Federal Aviation  
Administration**

**INFORMATION FOR PUBLIC  
RESPONDENT**

**SPECIAL ACTIVITY AREA (SAA) DATA FORM**

**Paperwork Reduction Act Statement: A federal agency may not conduct or sponsor, and a person is not required to respond to, nor shall a person be subject to a penalty for failure to comply with a collection of information subject to the requirements of the Paperwork Reduction Act unless that collection of information displays a currently valid OMB Control Number. The OMB Control Number for this information collection is 2120-0754. Public reporting for this collection of information is estimated to be approximately 20 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, completing and reviewing the collection of information. All responses are mandatory per 49 USC § 40103. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to the FAA at: 800 Independence Ave. SW Washington, DC 20591 Attn: Information Collection Clearance Officer, AES-200.**



**SPECIAL ACTIVITY AREA (SAA) DATA FORM**

Page: \_\_\_ of \_\_\_  
 Initials: \_\_\_\_\_  
 ID: \_\_\_\_\_

**I. SUBMISSION**

1. Name	2. Organization	3. Date
4. Email	5. Phone	6. Authorizing Official/Title/Routing Symbol
7. Purpose of Submission: <input type="radio"/> New Area - Complete as much of the form as possible <input type="radio"/> Changes to Existing Area - Complete the items necessary to describe change(s) <input type="radio"/> Cancel Area - Complete items 1 - 12		8. Proposed Effective Date

**II. GENERAL DATA**

9. SAA Area Type <input type="text" value="P"/>  Other:	10. SAA Area Use <input type="checkbox"/> Civil <input type="checkbox"/> Military <input type="checkbox"/> Joint	11. Associated Facility (check all that apply) Airport, ID:  NAVAID, ID:  FSS, ID:	12. Center Point Coordinates Lat: ___ ° ___ ' ___ " ___ Long: ___ ° ___ ' ___ " ___	
13. Radius around Center Point(NM)	14. Local Time of Use	15. Maximum Altitude (MSL, in ft.)	16. Minimum Altitude (MSL, in ft.)	
17. ATC Contact Facility	18. Contact Frequency (MHz)	19. Area Name (if applicable)	20. Nearest City/Town and State	21. Include on VFR Chart? <input type="radio"/> No <input type="radio"/> Yes

**III. REMARKS**

FAA Form 7900 – X(X/XX)

Please refer to NFDC website (<https://nfdc.faa.gov/>) for the most current version of this form and to submit data electronically. In the event the website is unavailable, please complete a hard copy of the form and fax or mail the completed form to the FAA. See page 4 of the order for faxing and mailing instructions.