				Exp. 9/30/2017
Federal Aviation Administration U. S. Department of Transportation	Р	ASSENGER FACILITY	CHARGE (PFC) APF	PLICATION
1. Application Type (Check all that apply)			FAA USE ONLY	
a. Impose PFC Charges		Date Received	PFC Number	
b. Use PFC Revenue				
c. Amend PFC No.				
		PART I		
Public Agency Name, Address, and Contact Person Agency Name		3. Airport(s) to Use	4. Consultation Dates	
			a. Date of Written Notice to Air Carriers:	
Address			b. Date of Consultation Meeting with Air Carriers:	
City, State, ZIP		c. Date of Public Notice		tice
Contact Person				
		PART II		
5. Charges				
a. Airport to Impose b. Level		c. Total Estimated PFC Revenue by Level	d. Proposed Effective Date:	e. Estimated Expiration Date:
\$1.00	\$2.00 _\$3.00	Impose Use		
 □\$4.00 □		Impose	İ	
φ+.00		Use		
		PART III		
6. Attachments (Check all that Apply) Attached Submitted with Application Number Document				
а. 🔲 🔲	Airport C		bital Improvement Plan	
b.		Project Information (Attachment B) Air Carrier Consultation and Public Notice Information		
d. Request to Exclude Class(es)				
e. Alternative Uses/Projects				
f. g		Competition Plan/Update ALP/Airspace/Environmental		
9.		Notice of Intent Project Information		
i.				
		PART IV		
7. With respect to this PFC application I he To the best of my knowledge and belief, a This application has been duly authorized The public agency will comply with the as For those projects for which approval to environmental reviews required by the Na If required, the public agency has submitt If required by 49 U.S.C. 40117(d)(4), ade been made by the public agency.	all data in this ap, I by the governin surances (Apper use PFC revenue ational Environment a competition	plication are true and correct; g body of the public agency; ndix A to Part 158) if the applica e is requested, all applicable A ental Policy Act have been con plan in accordance with 49 U.	LP approvals, airspace de npleted. S.C. 47106(f); and	
a. Typed Name of Authorized Representative	b. Title		c. Telephone Number	
	d. E-mail	Address	e. Fax Number	
f. Signature of Authorized Representative			g. Date Signed	

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