TSA AIRSPACE WAIVER APPLICATIONS

Screenshots

OMB control number 1652-0033

Exp. 12/31/2025

Federal Aviation Administration
Bringing Safety to America's Skies

Transportation Security Administration

TSA/FAA Waiver & Airspace Access Program

* Username:

* Password:

Login | Create Account | Forgot Username? | Forgot Password?

If you have forgotten your username, please click the "Forgot Username?" button above.
If you have your username, and need to reset your password, you may click "Forgot Password?" instead.
If you are still having issues, please email AJW-AAP-Support@faa.gov for assistance.

PRIVACY ACT NOTICE

AUTHORITY: 49 U.S.C. § 114, Pub. L. 108-176. **PRINCIPAL PURPOSE(S)**: This information will be used to conduct background checks in connection with flight authorizations and waivers of flight restrictions. **ROUTINE USE(S)**: This information may be shared with aircraft and airport operators, the FBI, and the FAA, or for routine uses identified in TSA system of records, DHS/TSA 002, Transportation Security Threat Assessment System. **DISCLOSURE**: Voluntary; failure to furnish the requested information may result in delays in processing your application or a denial of your application. Failure to furnish your Social Security Number (SSN) or Passport Number (PPN) may result in delays in processing your application.

Paperwork Reduction Act Burden Statement: Through this information collection, TSA is gathering information about you to facilitate your application for a flight authorization or waiver of a flight restriction into or out of Ronald Reagan Washington National Airport (DCA) or other applicable flight restricted airspace. This is a mandatory collection of information if you wish to obtain a flight authorization into or from DCA or waivers of flight restricted airspace. It is estimated that the total average burden per response associated with this collection is approximately 45 minutes. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The control number assigned to this collection is OMB 1652-0033, which expires 12/31/2025.

About Waiver Processing

If you are determined to be eligible for a waiver, you will be notified and provided with a unique waiver authorization. Although complete criminal history checks take time to complete, we anticipate returning results as soon as they are received, provided there is no indication of a criminal history. Normally the process may take up to 5 business days to complete.

All previous waivers pertaining to this type of flight operation are void.

About DASSP Flight Authorization Processing

The guidance listed below is a broad overview of the flight authorization application process for operations into DCA.

In order to receive an authorization for DCA access from TSA, an operator must be on the TSA DCA approved operator list, take off from an approved TSA Gateway Airport and utilize a TSA approved Armed Security Officer (ASO).

1. Before completing the flight authorization application form, please reserve an FAA slot reservation at this website: www.fly.faa.gov. This reservation is tentative until the flight authorization is approved, at which time TSA Office of Security Operations, Airspace Waivers Branch will confirm the slot reservation with FAA.
2. The approved security coordinator, or company equivalent, must complete the flight

Waiver Type: DASSP | Confirmation #: | Current Login:

Proponent

	Requestor	Aircraft Operator	Aircraft Owner
Title			
First Name			
Middle Name			
Last Name			
Org./Company			
Street			
City			
State/Province			
Zip Code			
Country			
Phone			
24 hr Phone			
Email			

Itinerary

Waiver Subtype	DAS
Application Date	10/19/2021

Waiver Start Date	Waiver End Date
no information provided	no information provided

DASSP Information	
DASSP Company Name	
DASSP Operator Number	
DASSP Security Coordinator	

Departure Gateway Airport Information	
Airport Code	
Fixed Based Operator (FBO)	
Departure Date	
Depature Time	

Arrival Information to DCA	
Arrival Date to DCA	
Arrival Time to DCA	

Departure Information from DCA	
Departure Date from DCA	
Departure Time from DCA	
n Airport	

Purpose of Flight/Comments	

Aircraft

Tail Number	Call Sign	Aircraft Type	Registration	Gross Weight

Manifest

Person Type	Full Name	SEX	Birth Date	Birth Place	Social Security	Passport Country & Number	Pilot Cert. Country & Number	ASO Dep/Arr & TSA Credential	Passenger DCA Dep/Arr

Security Statement

How is the aircraft secured when not operational at the place of origin? (Locked hangar, fenced area with gate access, security guard, etc.)	
How are the persons on the manifest positively identified before boarding the aircraft?	
Provide additional security measures taken, if any.	

Affirmation under penalty of perjury

I, hereby affirm, under penalty of perjury, that:
The information I have provided on this application is true, complete, and correct to the best of my knowledge and belief and is provided in good faith. I understand that a knowing and willful false statement, or an omission of a material fact, on this application may be punished by fine or imprisonment or both (see section 1001 of Title 18 United States Code), and may be grounds for denial of a waiver request or suspension or revocation of a waiver and other penalties.

Name	
Title	
Date	

Accepted ☐

Documents

File	User	Load Date

Rejection Messages

Date	User	Rejection	Reason

Federal Aviation Administration
Bringing Safety to America's Skies

Transportation Security Administration

Waiver Form

Summary | Proponent | Itinerary | Aircraft | Manifest | Security Stmt | Documents

Save Draft | Save Edits | Submit | Copy | Modify | Void | Terminate | Print

Summary

Waiver Type: Domestic **Confirmation #:** **Current Login:**

Proponent

	Requestor	Aircraft Operator	Aircraft Owner
Title			
First Name			
Middle Name			
Last Name			
Org./Company			
Street			
City			
State/Province			
Zip Code			
Country			
Phone			
24 hr Phone			
Email			

Itinerary

Waiver Subtype	
Approved Distance	
Application Date	10/19/2021

Waiver Start Date	Waiver End Date
no information provided	no information provided

DCA Information	
Radial Distance	

FRZ Information	
FRZ Airport Destinations	

--OR--

FRZ Overflights	
Purpose of Flight/Comments	

Aircraft

Tail Number	Call Sign	Aircraft Type	Registration	Gross Weight

Manifest

Person Type	Full Name	SEX	Birth Date	Birth Place	Social Security	Passport Country & Number	Pilot Cert. Country & Number	ASO Dep/Arr & TSA Credential

Security Statement

How is the aircraft secured when not operational at the place of origin? (Locked hangar, fenced area with gate access, security guard, etc.)	
How are the persons on the manifest positively identified before boarding the aircraft?	
Provide additional security measures taken, if any.	

Affirmation under penalty of perjury

I, hereby affirm, under penalty of perjury, that:
The information I have provided on this application is true, complete, and correct to the best of my knowledge and belief and is provided in good faith. I understand that a knowing and willful false statement, or an omission of a material fact, on this application may be punished by fine or imprisonment or both (see section 1001 of Title 18 United States Code), and may be grounds for denial of a waiver request or suspension or revocation of a waiver and other penalties.

Name	
Title	
Date	

Accepted

Documents

File	User	Load Date

Rejection Messages

Date	User	Rejection	Reason

Waiver Type: International | Confirmation #: | Current Login:

Proponent

	Requestor	Aircraft Operator	Aircraft Owner
Title			
First Name			
Middle Name			
Last Name			
Org./Company			
Street			
City			
State/Province			
Zip Code			
Country			
Phone			
24 hr Phone			
Email			

Itinerary

Waiver Subtype	
Flight Type	
Application Date	10/19/2021

Waiver Start Date	Waiver End Date
no information provided	no information provided

Itinerary	
Departure Point(s)	
Intermediate Stop(s)	
Destination Point	
Final Destination(s)	

Destination Contact Information	
Name	
Street	
City	
State/Province	
Country	
Zip Code	
Phone	

Purpose of Flight/Comments	

Aircraft

Tail Number	Call Sign	Aircraft Type	Registration	Gross Weight

Manifest

Person Type	Full Name	SEX Code	Birth Date	Birth Place	Social Security	Passport Country & Number	Pilot Cert. Country & Number	ASO Dep/Arr & TSA Credential

Security Statement

How is the aircraft secured when not operational at the place of origin? (Locked hangar, fenced area with gate access, security guard, etc.)	
How are the persons on the manifest positively identified before boarding the aircraft?	
Provide additional security measures taken, if any.	

Affirmation under penalty of perjury

I, hereby affirm, under penalty of perjury, that:
The information I have provided on this application is true, complete, and correct to the best of my knowledge and belief and is provided in good faith. I understand that a knowing and willful false statement, or an omission of a material fact, on this application may be punished by fine or imprisonment or both (see section 1001 of Title 18 United States Code), and may be grounds for denial of a waiver request or suspension or revocation of a waiver and other penalties.

Name	
Title	
Date	

Accepted

Documents

File	User	Load Date

Rejection Messages

Date	User	Rejection	Reason