

Vehicle Information

Year & Make	Model	Color	License No.	VIN #	Ins. Rec.	Permit No.*

*To be assigned by Friedman Memorial Airport Manager's Office

Current Drivers

First Name	Last Name	Address	Chauffer License No.	Expiration of Chauffer License	Most Current Copy Received

Proof of City of Hailey License

Attach a copy of current City of Hailey Taxi License.

License issue date: _____

I certify that I have read, understand and agree to comply with the terms and conditions of *Friedman Memorial Airport Authority Amended Regulation 94-1*; that all the information I have provided with this Application is current, complete and accurate; and that I am personally obligated to immediately report changes in the information provided with this Application to the Airport Manager's Office.

Signature (Permittee Only)

Date

Typed/Printed Name

Point of Contact Name

Typed/Printed Title

Point of Contact Phone

Entered into on behalf of Friedman Memorial Airport Authority, Friedman Memorial Airport Authority