



REQUEST FOR WAIVER

| APPLICANT INFORMATION | | | | | |
|---|-------------------------|-------------------|---|--------------------|----------|
| AIRPORT/HELIPORT NAME Nolnacs | | | | DATE 11/11/2019 | |
| NAME OF LICENSEE Sam Scanlon | | | POINT OF CONTACT (if different than Licensee) | | |
| DAYTIME PHONE NUMBER (817) 307-1137 | EMAIL sam@jsfirm.com | | DAYTIME PHONE NUMBER - | EMAIL | |
| STREET ADDRESS/P.O. BOX 3855 Route 981 | | | STREET ADDRESS/P.O. BOX | | |
| CITY Mount Pleasant | STATE pa | ZIP CODE 15666 | CITY | STATE | ZIP CODE |

| WAIVER REQUEST | |
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| <p>State request and describe condition to be waived (attach documents, maps and photos as necessary): <input checked="" type="checkbox"/> Attachments</p> <p>Request a Bureau waiver for runway length to 1150 ft. As recognized in the letter dated May 20th 2019 from PA DOT. Runway is more than adequate for type of aircraft PA-18-150 supercub.</p> <hr/> <hr/> | |
| <p>Explain why criterion cannot be met:</p> <p>As determined by PA-DOT letter dated May 20th, 2019;</p> <p>Rising terrain and trees east of the airport are just beyond the 1,500' approach surface. Extending the runway in that direction would interfere with the approach surface. Approach end runway 10 - has trees, private drive to owners barn</p> <hr/> <hr/> | |
| <p>List all actions taken to alleviate non-standard condition (attach additional sheets and documentation as necessary):</p> <p>Extended approach end of runway 28 as far as possible as to not interfere with 1500'</p> <hr/> <hr/> | |
| <p>List Type Approach (each rwy):</p> <p><u>28</u> <input checked="" type="checkbox"/> Visual <input type="checkbox"/> NPI <input type="checkbox"/> PIR</p> <p><u>10</u> <input checked="" type="checkbox"/> Visual <input type="checkbox"/> NPI <input type="checkbox"/> PIR</p> | <p>Public Airports Only:</p> <p>Municipality in which located: <u>Donegal Township</u></p> <p>Airport Hazard Zoning Enacted: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> |

| CERTIFICATION | |
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| <p>I hereby certify that I am the owner, or authorized agent, of the above named airport/heliport, that the information contained in this application and any accompanying documents is true and correct.</p> | |
| <p><u>Sam Scanlon</u> Name (Print)</p> <p><u>Owner / Licensee</u> Title</p> | <p> Signature</p> <p><u>11/11/2019</u> Date</p> |

Complete and mail to: **PennDOT Bureau of Aviation**
Attn: Aviation Specialist Supervisor
P.O. Box 3151
Harrisburg, PA 17105-3151

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| <p>FOR BUREAU OF AVIATION USE ONLY</p> <p>Received _____</p> <p>Region _____</p> |
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