



pennsylvania
DEPARTMENT OF TRANSPORTATION
www.pennndot.gov

REQUEST FOR WAIVER

APPLICANT INFORMATION					
AIRPORT/HELIPORT NAME <u>Posh Heliport</u>					DATE <u>3/21/2019</u>
NAME OF LICENSEE <u>Joseph Posh</u>			POINT OF CONTACT (if different than Licensee) <u>Jody Wendt</u>		
DAYTIME PHONE NUMBER <u>610 954 9791</u>	EMAIL <u>poshproperties@com</u>	DAYTIME PHONE NUMBER <u>610 217 0180</u>	EMAIL <u>jwendt@com</u>		
STREET ADDRESS/P.O. BOX <u>2216 Willow Park Road</u>			STREET ADDRESS/P.O. BOX		
CITY <u>Bethlehem</u>	STATE <u>PA</u>	ZIP CODE <u>18020</u>	CITY <u>Bethlehem</u>	STATE <u>PA</u>	ZIP CODE <u>18020</u>

WAIVER REQUEST	
State request and describe condition to be waived (attach documents, maps and photos as necessary): <input type="checkbox"/> Attachments	
<u>Approach paths the state says there shall be two approach paths</u>	
<u>request for single in/out corridor</u>	
Explain why criterion cannot be met:	
<u>many of the trees sited as obstructions do not belong to the licensee and cannot be trimmed to meet the state height requirements</u>	
List all actions taken to alleviate non-standard condition (attach additional sheets and documentation as necessary):	
List Type Approach (each rwy): <input type="checkbox"/> Visual <input type="checkbox"/> NPI <input type="checkbox"/> PIR	Public Airports Only: Municipality in which located: _____ Airport Hazard Zoning Enacted: <input type="checkbox"/> Yes <input type="checkbox"/> No

CERTIFICATION	
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.	
<u>Joseph Posh</u> Name (Print)	 Signature
<u>Licensee</u> Title	<u>3/21/2019</u> Date

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

FOR BUREAU OF AVIATION USE ONLY
Received <u>6/4/19</u> <u>mk</u>
Region <u>1</u>