Aviation Facilities Inc. [AFI]
Rental Application

Today's Date / / Anticipated Move In Date / /

VIP Hangar ☐ AFI TieDown ☐

Name

Address City

State ZIP

Phone # Home Work

Mobile

Drivers Lic # State

Personal References

Name Address Phone

Emergency Contact

Name Phone #

Aircraft Information

N# Type Year

Last Annual Date Copy Of Registration ☐

Insured By

Years of Aircraft ownership

Est. Flight Hours Per Year

Aircraft Owner

Name Address

Partners Information

Name Address

Name Address

Signature of Applicant Date / /

Note: [Signature authorizes AFI to compete credit and background checks]