



# State of Alaska

## Department of Transportation & Public Facilities



### Airport After-Hours Request Form

*Air Carriers, please fill out this section:*

<b>Carrier Name:</b> _____	<b>Date of Request:</b> _____
<b>Airport Name:</b> _____	<b>Airport Duty Hours:</b> _____
<b>Service Requested:</b>	<input type="checkbox"/> Runway Inspection <input type="checkbox"/> ARFF <input type="checkbox"/> Snow/Ice Control
<b>Reason for Request:</b>	<input type="checkbox"/> Early/Late Flight <input type="checkbox"/> Extra Section/Charter
<b>Type of Operation:</b>	<input type="checkbox"/> Passenger <input type="checkbox"/> Cargo <input type="checkbox"/> Other: _____
	<input type="checkbox"/> Arrival <input type="checkbox"/> Departure
<b>Aircraft Make:</b> _____	<b>Model:</b> _____
	<b>N Number:</b> _____
Aircraft FAA Certified for over 30 passenger seats (Aircraft Operating Permit required) Aircraft Operating Permit included with this request	
<b>Flight Number:</b> _____	
<b>Scheduled arrival date/time:</b> _____	<b>Scheduled departure date/time:</b> _____
<b>Anticipated duration:</b> _____	
<b>HAZMAT onboard?</b>	<b>HAZMAT details:</b> _____
<b><u>REQUESTOR CONTACT INFORMATION</u></b>	
<b>Requestor Name:</b> _____	<b>Title:</b> _____
<b>Office phone:</b> _____	<b>Cell:</b> _____
	<b>Fax:</b> _____
<b>Email address:</b> _____	
<b>Signature of Authorized Agent:</b> _____	

*DOT&PF, please fill out this section:*

<b>Approved by:</b> _____	<b>Title:</b> _____
<b>Office phone:</b> _____	<b>Cell:</b> _____
	<b>Fax:</b> _____
<b>Signature:</b> _____	

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# FOR DOT&PF USE ONLY

Request received with 24-hour notice     Aircraft Operating Permit received if aircraft seats over 30 passengers

**Number of staff:** \_\_\_\_\_

Extended shift

Call back

**Airport Status:**

Stable conditions

Active winter weather

Other: \_\_\_\_\_

**Actual** arrival date/time: \_\_\_\_\_ **Actual** departure date/time: \_\_\_\_\_

**Actions Performed** (check all that apply):

Runway Inspection

Condition Reporting

Wildlife Inspection

Wildlife Hazing

Snow & Ice Control

ARFF Standby

**Snow & Ice Control:** Start time \_\_\_\_\_ End time \_\_\_\_\_

Starting FICON: \_\_\_\_\_

Ending FICON: \_\_\_\_\_

**NOTES**

### FINANCIAL SECTION

Item	Cost	Qty	Units	Total
After-hours response	\$250		Man-Hour	
<b>Total Cost to Air Carrier</b>				

#### IRIS Coding:

TEMPLATE	AR UNIT	UNIT	ACTIVITY	SUB-ACT	LOCATION	REV CODE
<b>TNHA09</b>	<b>25NHA1244</b>	<b>7030</b>	<b>AAHC</b>			<b>5244</b>

Approved : \_\_\_\_\_

Date: \_\_\_\_\_