

# HABERSHAM COUNTY AIRPORT

## HANGAR APPLICATION

*PLEASE FILL OUT FORM IN ITS ENTIRETY*



***Applicant's Personal Information:***

Last Name _____		First Name _____	
Address _____		City _____	State _____ Zip _____
Cell (____) _____ - _____	Work Phone (____) _____ - _____		Driver's License _____
Home (____) _____ - _____	Fax (____) _____ - _____	Email _____	

***Hangar Type Requested:***

<input type="checkbox"/> New	<input type="checkbox"/> First Available	
<input type="checkbox"/> Open	<input type="checkbox"/> Closed	<input type="checkbox"/> Either
<input type="checkbox"/> T-Shape	<input type="checkbox"/> Box	

***Aircraft Information:***

Make _____	Model _____	N- _____
Wingspan _____ Minimum Acceptable Door Width & Height _____		

By affixing my signature to this document, I request assignment of a hangar as described above, subject to the execution of a lease agreement for said hangar. This application is subject to the policies and procedures of Habersham County regarding the waiting list for hangars at Habersham County Airport.

APPLICANT SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_, 20\_\_\_\_.

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FOR HABERSHAM COUNTY ADMINISTRATIVE USE ONLY

Administrative Fee Paid \$ \_\_\_\_\_ Date \_\_\_\_\_ Receipt No. \_\_\_\_\_ Rec'd By \_\_\_\_\_

Hangar Deposit Paid \$ \_\_\_\_\_ Date \_\_\_\_\_ Receipt No. \_\_\_\_\_ Rec'd By \_\_\_\_\_

First Offer: Hangar \_\_\_\_\_ Offered On \_\_\_\_\_

☐ ACCEPTED    ☐ DECLINED    ☐ NO REPOSE    Date \_\_\_\_\_ By \_\_\_\_\_

Second Offer: Hangar: \_\_\_\_\_ Offered On \_\_\_\_\_

☐ ACCEPTED    ☐ DECLINED    ☐ NO REPOSE    Date \_\_\_\_\_ By \_\_\_\_\_