



Application **MUST be completed in full**, with required Deposit in order to be processed.

Applying for: CMA OXR

Applicant Information

Full Name: _____ Date: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

City State ZIP Code
Business Name: _____ Date: _____

Address: _____
Street Address Suite/Unit #

City State ZIP Code

Cell/Home Number: _____ Business Phone: _____

Email: _____

Aircraft Information

Make and Model: _____ Tail Number: _____

Color/Markings: _____ Is aircraft airworthy? YES NO

Wingspan: _____ Length: _____ Height: _____

Is aircraft registered to you? YES NO Do you own any other aircraft? YES NO Are you on other airport YES NO

Disclaimer and Signature

The undersigned hereby makes application for a future hangar at one of the County of Ventura Airports. A deposit of one month's rent is required; deposit is refundable only if applicant requests removal from waitlist prior to a hangar being offered by County. The applicant agrees to the Hangar Waitlist Policy.

Signature: _____ Date: _____

Official Use Only

FAA Registration: YES NO Airworthy Certificate/Similar: YES NO Payment: YES NO

Existing Tenant? YES NO If so, tenant hangar/tiedown _____ Payment Amount: _____

Received By: _____

Date and Time added to Waitlist: _____ By: _____

Offer Info: Hangar: Offered On: Certified Mail Number:
Accepted Declined No-Response
 Date: _____ By: _____

Remove from Waitlist Date Removed: _____