AIRCRAFT PARKING BAY **EXPRESSION OF INTEREST**



Please complete the details below and send this form to: Operations Manager, Jandakot Airport Holdings 16 Eagle Drive, Jandakot Airport WA 6164

Fax: 9417 3777 or email: aviation@jandakotairport.com.au

COMPANY/INDIVIDUAL DETAILS			
Company/Individual Name:			
Street Address:			
Postal Address:			
Telephone Number:	Email:		
AIRCRAFT DETAILS			
Registration:			
Aircraft Type:			
Purpose of Operation (Select all that apply)	☐ Private use ☐ Flight training ☐ Charter ☐ Cross hire		
Maximum Take-Off Weight (MTOW):			
Wingspan (meters):			
PREFERRED PARKING AREAS			
Apron:	☐ Southern ☐ Cent	ral Northern	
Вау Туре:	Grass Hard	Istand	
Bay Number:			
Start Date: (For a minimum 12-month licence)	/		
Comments:			
This information has been advised by:			
Name			
DateSignature			
PRIVACY STATEMENT: The personal information and advantage of the Jandakot Airport Holdings Pty Length of the Jandakot Airport Holdings Pty Length of the Jandakotairport.com.au/corport disclosing personal information as set out in	d (JAH) Privacy Policy te/privacy-policy.html. By su	as published on the Jana	dakot Airport website at
OFFICE USE	T		
Parking Bay:	Start Do	nte:/	./
Notes:			