



Hangar Wait List Application Form

Contact Information:

Name: _____

Address: _____

Home Phone: _____

Cell Phone: _____

Email Address: _____

Aircraft Information:

Type of Aircraft: _____

Tail Number: _____

Hangar Dimensions:

CHECK BOX(ES) BELOW TO INDICATE PREFERENCE

	<u>Door Width</u>	<u>Clear Door Height</u>	<u>Check Preference</u>
Southeast Hangars:	45'	12'	<input type="checkbox"/>
	42.5'	12'	<input type="checkbox"/>
	44'	14'	<input type="checkbox"/>
	54'	17'	<input type="checkbox"/>
Dome Hangars:	43'	12'	<input type="checkbox"/>

Signature: _____

Date: _____

Print Name: _____

MAKE CHECK PAYABLE TO: HERNANDO COUNTY BOCC and mail to below address

Office Use Only

Date Paid _____ Payment Method _____

Waiting List #: _____