Airside Application Form



Application to Operate a Vehicle Airside at Kingaroy Aerodrome

Signed......Date....

This form is to be submitted to: Aerodrome Manager South Burnett Regional Council Kingaroy Office PO Box 336 Kingaroy QLD 4610 Email: info@sbrc.qld.gov.au I (print full name) of (Postal Address) have read, understood and retained a copy of Part 2 Section 9 of the Kingaroy Aerodrome Manual "Airside Vehicle Control" and agree to abide by all rules and regulations contained within the section. My reason for requiring a vehicle to go airside is as follows Details of the vehicle/vehicles I will be using airside are Make..... Model..... Registration No. incl State..... Please attach additional details if required Please forward a copy of your current drivers licence with this application. It is the responsibility of the vehicle operator to ensure Council is informed of any changes (change of vehicle or licence status) Signed......Date..... Witness (please print)