



**WORCESTER REGIONAL AIRPORT**

POLICE / AIRCRAFT RESCUE FIRE FIGHTING DEPARTMENT  
375 AIRPORT DRIVE  
WORCESTER, MASSACHUSETTS 01602  
PHONE (508) 799 1348 FAX (508) 799 1354

**2002**

**Airfield Access Application**

Gate Card #(s) \_\_\_\_\_ Sticker #(s) \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: (Home) \_\_\_\_\_ (Work) \_\_\_\_\_

Aircraft-Make and Model: \_\_\_\_\_

Aircraft Registration #: \_\_\_\_\_  
(copy of registration required)

Vehicle #1

Make, Model and Color: \_\_\_\_\_

Registration (# and state): \_\_\_\_\_

Insured to \$100,000 Property Damage: YES( ) NO( )  
(copy of insurance required)

Vehicle #2

Make, Model and Color: \_\_\_\_\_

Registration (# and state): \_\_\_\_\_

Insured to \$100,000 Property Damage: YES( ) NO( )  
(copy of insurance required)

T-Hanger #: \_\_\_\_\_

Tiedown #: \_\_\_\_\_

I, undersigned, acknowledge that I have read and understood the T-Hanger and Tiedown Automobile Access Rules and Regulations, and will surrender upon demand from the Airport Director, for any reason, the permit issued. I also acknowledge that I will be fully responsible for any type of damages resulting from movement and parking of vehicle.

The Commission reserves the right to interpret any part of this agreement in their favor.

Aircraft/Vehicle Owner: \_\_\_\_\_

Officer Issuing Permit: \_\_\_\_\_ Date: \_\_\_\_\_ / \_\_\_\_\_ / **2002**