## **CIVIL AIRCRAFT LANDING PERMIT**

Read Privacy Act Statement on back before completing this form. If additional space is required, continue on back identifying by item number OMB No. 0701-0050 OMB approval expires Aug 31, 2027

The public reporting burden for this collection of information is estimated to average 10 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing the burden, to the Department of Defense, Washington Headquarters Services, at whs.mc-alex.esd.mbx.dd-dod-informationcollections@mail.mil. Respondents should be aware that notwithstanding any other provision of law, no person shall be subject to any penalty for failing to comply with a collection of information if it does not display a currently valid OMB control number.

Applicant and agents have read, understand, and and orders. Such compliance is an express cond belief. As a corporate representative, I certify that commander as our agent on all matters arising from	ition of th t I have a	nis permit. I d authority to d	certify that the ertify this info	information	on contain	ed in this	permit is t	rue to the	best of m	y knowled	ge and
6. CERTIFICATION BY INDIVIDUAL OR AUTHO					- h l a u a su ul		la dia Nata	1 and loo		monto dire	) ativos
NOMBER	GER	CREW	(Pounds)	YES	NO	YES	NO	YES	NO	BILITIES	NO
a. b. REGISTRATION NUMBER	(2) PASSEN	N- (1)	GROSS TAKE-OFF WEIGHT	(1) IWO-WAY W		`WAF	TROBE RNING SHTS	(3) TRANS- PONDER		(4) IFR CAPA- BILITIES	
	d. CA	APACITY	e. MAX				f. EQUIPMENT				
5. AIRCRAFT DATA											
4. PURPOSE OF USE									(/		NO
							3. ARE PILOTS INSTRUMENT YES RATED AND CURRENT? (X one)				
b. RELATIONSHIP TO PARENT ORGANIZATIO	ON										V=5
		c. ADDRESS (Street, City, State, Zip Code, E-Mail)					2. NAMES OF AIRFIELD(S) TO BE USED				
a. NAME		c. ADDRES	S (Street, Cit)	v. State. 7	ip Code. F	E-Mail)	2. NAMES	OF AIRF	TELD(S)	TO BE US	ED
b. When required, I or my agent will obtain diplomatic or overflight clearance when operating over international borders.  1. USER		poses direct									
each landing for final clearance instructions. The remarks section of the flight plan will include user name and permit identification number.	d. This receive Govern	tivities or to protect national security.  This permit does not necessarily entitle my aircraft to ceive aviation fuel, oil, or other services from U.S. overnment sources.  On-board personnel are not authorized activities except						g. An approved copy of this permit must be aboard each aircraft using the military airfield			
Except for weather alternate use or emergencies, I or my agent will contact each installation commander at least 24 hours prior to	nmanders of t operations	ary	f. Use is limited to the listed aircraft, period indicated, purpose stated, and conditions show and is not transferable								
Permission is requested to use the listed military	. `	′	ŭ								
SECTION I - INFORMATION REQUIRED FROM	USER										
FLEASE DO NOT KETUKN TOUK FORM TO I	HE ABO	VE ORGAN	IZATION. SE	ND COMP	LETED F	ORM TO	THE APP	ROPIATE	ADDRES	SS ON BA	CK.
control number.  PLEASE DO NOT RETURN YOUR FORM TO T											

(YYYYMMDD)

(Include Area Code)

SECTION II - FOR	USE BY APRROVI	ING AUTHORIT	Υ								
7. PERIOD OF USE		8. FREQUENCY OF USE		9. IDENTIFICATION NO.	10. THIS PERMIT SUPERSEDES PERMIT NO. (Identification No.)						
a. FROM (YYYYMMDD)	b. TO (YYYYMMDD)					LIXIII IVO. (ISSIII	modion	<i>.,</i>			
11. THIS PERMIT IS	S GRANTED ON PR	RIOR EXECUTION	ON OF DD FORMS 2400	AND 2402	EDIT AUTHORIZED 13. LANDING JEL ISSUES (X one) FEES (X one)						
a. DD FORM 2400 (Dated and Filed)			b. DD FORM 2402 (Date	ed and Filed)	YES	□ NO	YES	□ NO			
14. APPROVING O	FFICIAL										
a. TYPED OR STA	MPED NAME, TITL	E AND ORGAN	IZATION	b. SIGNATURE							
				c. DATE SIGNED (YYYYMMDD)							
IF ADDITIONAL SF	PACE IS REQUIRED	D, CONTINUE H	IERE (Refer to item numb	l per)							
			·	,							
		This form is a	vailable at http://www.esd	I.whs.mil/Directives/forms/dd20	000 2499/						
ARMY						FORCE					
COMMANDER, US	SAASA, ATTN: DAN	10-AVA		HQ USAF/A3OJ							
BLDG 1466, 9325	GUNSTON RD, SU			112 LUKE AVENUE, SUITE :	340						
FT BELVOIR, VA 2 (703) 806-0687	22060-5582			JBAB, DC 20032-6400 (202) 704-9694							
	la-dcs-g-3-5-7.list.us	saasaops@army	<u>y.mil</u>	calp@us.af.mil							
AR 95-2 Can be vi	ewed at: https://arm	ypubs.army.mil/		AFI 10-1001 can be viewed a	at: https://v	www.e-publishing.af.	mil/				
	N.	AVY		MARINES							
WASHINGTON NA 716 SICARD ST S WASHINGTON, Do (202) 433-0120 calphq@us.navy.m	E C 20374			COMMANDER, MARINE CO 3000 MARINE, CORPS PEN WASHINGTON, DC 20350-3 (703) 695-0105 mcicom_calp@usmc.mil MCICOM guidance can be vi	TAGON R 000		1AND				
	avy.mil/om/calp.html			https://www.cnic.navy.mil/om							

## PRIVACY ACT STATEMENT

AUTHORITY: 49 U.S.Code, Section 44502(d)

**PRINCIPAL PURPOSE(S):** When partially completed, indicates desire of an individual or corporation to operate civil aircraft into a military airfield; when validated by a military approving authority, indicates that an individual or corporation has met the conditions required to request a PPR to land civil aircraft at a military facility.

ROUTINE USE(S): None. For Internal Use Only.

**DISCLOSURES:** Voluntary; however, failure to provide this information will result in an individual or corporation being unable to operate civil aircraft info a military airfield.