

## City of Phoenix Aviation Department

Phoenix Goodyear Airport  
1658 South Litchfield Road  
Goodyear, AZ 85338  
(623) 932-4500  
www.goodyearairport.com

### 2008 Aircraft Storage Waiting List Application

\_\_\_\_\_  
Applicant Name (Required)

\_\_\_\_\_  
Aircraft Make and Model

\_\_\_\_\_  
Company/Corporate Name (Optional)

\_\_\_\_\_  
FAA Registration (Tail) Number

\_\_\_\_\_  
Mailing Address

\_\_\_\_\_  
Location of Current Storage Facility

\_\_\_\_\_  
City, State, Zip Code

\_\_\_\_\_  
Phone Numbers (Residence/Work/Cell/Pager/Fax)

\_\_\_\_\_  
E-Mail Address

Please check the type of Aircraft Storage Space desired:

Small Covered Tie Down (\$41.85 + .84\* = \$42.69 Deposit)

Large Covered Tie Down (\$55.68 + \$1.11\* = \$56.79 Deposit)

Small T-Hangar (\$136.81 + 2.74\* = \$139.55 Deposit)

Large T-Hangar (\$177.49 + \$3.55\* = \$181.04 Deposit)

#### \* City of Goodyear Sales Tax

Each application must be accompanied by an earnest money deposit equal to one month's rent at the current rate for the type of aircraft storage space requested. Deposits are refundable only if the applicant requests in writing to have his/her name removed from the waiting list prior to being offered a space. If the applicant refuses a space when offered, or cannot be located in fifteen (15) days, his/her deposit will be forfeited. Applicant's name will not be skipped or moved to the bottom of the waiting list.

It is the applicant's responsibility to confirm that the requested storage space is appropriate for the type and size of aircraft intended for storage, prior to payment of a waiting list deposit. In the event an applicant is offered an aircraft storage space and does not own an aircraft at that time, he/she will have 90 days to obtain one. After that, occupancy rights will be terminated.

Applicant agrees to keep his/her contact information current with the Airport Administration Office.

All Aircraft Storage Waiting List Applications are subject to approval.

\_\_\_\_\_  
Applicant Signature and Date

Airport Office Use Only:

Contact Record:

\_\_\_\_\_  
Transaction Number

\_\_\_\_\_  
Date and Time Deposit Received

\_\_\_\_\_  
Amount of Deposit Received