APSC FORM NO. 20 (Air Carrier)		DOCKET NO (Commission use only)		
	application should be typed, the mission. If any section herein is needed.		worn to, and one copy filed with the ration, so state.	
I.	Application of*(Name)			
	(Name)			
	Doing Business As	(Trade Name)		
	(State whether individual, partnership, corporation, or other form of enterprise)			
	Whose business address(Street)			
	(City) Mailing Address:	(State)	(Zip Code)	
	(Telephone Number)	(Fax Number)	(Email Address)	
subm			f <i>Code of Alabama</i> 1975, §31-13-29 by <u>osc.alabama.gov</u>) confirming the Applicant's	
II.	(Cert. No.); cha		ration;Extend an existing operation on orContract carrier by aircraft, in he transportation of:	
	(If general commodities, so state, and name exceptions, if any; if specific commodities, name them; if passengers, so state.)			
	FROM	TO		
	Or BETWEEN	AND ription of routes or territory)		
	As follows: (Give detailed desc	ription of routes or territory)		

Revised 2018

III.	Does applicant propose to handle "C.O.D." or collect-on-delivery shipments? Yes No		
* Place	e an "X" in appropriate space to indicate applicable phrase or phrases.		
IV.	The proposed operation will be: * year-round or seasonal between		
	andApproximately (Day & Month) (Day & Month)		
	times each;on schedule,not on (Number) (Day, week, month, year)		
	schedule,on call.		
V.	Applicant proposes to use approximatelyaircraft in the proposed service described (Number)		
	above, of the kind and type described in Appendix "A" hereto attached. (Give detailed description showing type, make, model, rated capacity motor number.)		
VI.	A financial statement, showing in detail applicant's current financial condition, is attached hereto as Appendix "B".		
VII.	The extent, if any, to which the applicant is directly or indirectly affiliated with, controlled by, or unde common control or management with any other carrier subject to Chapter 37-9, Code of Alabama 1975 is as follows:		
VIII.	A map showing the proposed operation, also the pertinent portions of applicant's present authority, if any is attached as Appendix "C".		
IX.	Copy (s) of contracts (s) under which applicant proposes to operate is/are attached hereto as Appendix "D". (Note: Applicants for a permit to operate as a <u>contract carrier must</u> furnish this information.)		
X.	Attached hereto is a () cashier's check or () money order in the amount of \$ 100.00 in payment of application fee as required by the Commission.		
XI.	Applicant will introduce approximately witnesses at the hearing, and will require		
	(Number) approximately hour (s) to present evidence. (Number)		
XII.	Copy of Articles of Incorporation is attached as Appendix "E".		

Revised 2018

- XIII. Applicant understands that the filing of this application does not, in itself, constitute authority to operate; will submit such additional information in connection with this application as the Commission may require; and will comply with the requirements of Chapter 37-9, Code of Alabama, and the rules and regulations of the Commission made thereunder, as are applicable to the operations herein proposed.
- □ Individual and Partner Applicants have attached hereto a completed "Proof of U.S. Citizenship" form.

* Place an "X" in appropriate space to indicate applicable phrase or phrases.

OATH

COUNTY OF _____

STATE OF _____

(Name of Affiant)

being duly sworn, states that he files this application as (indicate whether owner, or proprietor, title as officer of applicant corporation or association, member of applicant partnership, or other authorized representative of applicant) ________, that is such capacity, he/she is qualified and authorized to file and verify such application; that he has carefully examined all the statements and matters contained in the application; and that all such statements made and matters set forth therein are true and correct to the best of his knowledge, information, and belief and is a United States citizen. Affiant further states that the application is made in good faith, with the intention of presenting evidence is support thereof in every particular.

(Signature of Affiant)

Subscribed and sworn to before me, a notary in and for said State and County above named.

Date: _____

(Notary Public) _____

(Seal)

My Commission Expires _____