



Rowan County
Mid-Carolina Regional Airport
3670 Airport Loop
Salisbury, North Carolina 28147
704.216.7749

Non-Commercial Self-Fueling Permit

Rowan County

Mid-Carolina Regional Airport (RUQ)

March 6, 2023

NON-COMMERCIAL SELF-FUELING PERMIT

NON-COMMERCIAL SELF-FUELING PERMITTEE

Legal name: _____

Business or trade name (if different from legal name): _____

Primary office (and contact information):

Name: _____

Title: _____

Address: _____

City: _____ State: _____ Zip: _____

Telephone: (____) ____ - ____ Facsimile: (____) ____ - ____

Email Address: _____

On-airport address (if different):

Address: _____

City: _____ State: _____ Zip: _____

Self-Fueling is defined in the Primary Management and Compliance Documents (PMCDs) for the Mid-Carolina Regional (Airport) as the Non-Commercial fueling of an Aircraft by the Owner of the Aircraft, or the Owner's Employee, using the Owner's Vehicles, Equipment, and resources. Any entity engaging in Self-Fueling at the Airport shall hold a current and valid Self-Fueling Permit (Permit) approved by the County.

The County reserves the right to suspend or revoke the Permit of any Permittee, on a temporary or permanent basis, for Permittee's failure to comply with any of the terms and conditions of this Permit.

Please provide the following information (attach additional sheets if needed):

Aircraft					
FAA N-Number	Manufacturer	Model	Year	Fuel Type	
N _____	_____	_____	_____	_____	
N _____	_____	_____	_____	_____	
N _____	_____	_____	_____	_____	
N _____	_____	_____	_____	_____	
N _____	_____	_____	_____	_____	
Fuel Storage Facility					
Quantity	Fuel Type	Capacity	Construction Date	Above/Below Ground	Notes
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
Refueling Vehicles					
Quantity	Fuel Type	Capacity	Make/Model	Year	Notes
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

The Permittee agrees to the following:

- **PERMIT SCOPE:** Self-Fueling activities are limited solely to the Aircraft, fuel storage facility, refueling vehicle(s), and duration specified in this Permit.
- **FEE PAYMENT:** The Permittee agrees to pay all applicable rents, fees, and other charges when due and payable without offset of any kind whatsoever. The Permittee also agrees to pay any late fees, interest, penalties or related charges.
- **PERMIT LIMITATIONS:** This Permit may not be assigned or transferred to any entity and is limited to engage in the approved Self-Fueling activities in the location designated and only for the time specified in this Permit.
- **INFORMATION CHANGES:** The Permittee shall notify the County in writing within 21 calendar days of any change to the information contained in this Permit.
- **INSURANCE:** The Permittee shall maintain all required insurance coverages pursuant to the Airport's Rules and Regulations and applicable Legal Requirements.
- **INDEMNIFICATION:** The Permittee shall indemnify the County pursuant to the Airport's PMCDs.
- **COMPLIANCE WITH LEGAL REQUIREMENTS:** The Permittee shall comply with applicable Legal Requirements as may be developed or amended from time to time.
- **REPORTING:** The Permittee agrees to comply with the reporting requirements specified in the Airport's Rules and Regulations.

If, at any time, the Permittee does not comply with all the terms and conditions of this Permit, this Permit shall be invalid (null and void) and terminated. However, Permittee's obligations shall survive termination until all rents, fees, and other charges (e.g., late fees, interest, penalties, etc.) are paid in full, all fuel storage facilities and refueling vehicles are removed from the Airport, and all liabilities are resolved to the satisfaction of the County.

The undersigned representative of the Permittee certifies that he/she is authorized to sign for (on behalf of) the Permittee and agrees to abide by all of the terms and conditions under which this Permit is being granted.

Agreed and accepted:

Signature

Name: _____ Title: _____ Date: ____ / ____ / ____

Approved:

Signature

Name: _____ Title: _____ Date: ____ / ____ / ____

Time Period Authorized (check one/complete):

☐ Permit valid for one year from the date of approval.

☐ Permit valid from ____ / ____ / ____ (start date) to ____ / ____ / ____ (end date).