

State of Rhode Island
Rhode Island Airport Corporation

AIRCRAFT REGISTRATION APPLICATION

Please complete all information on this application and return with payment to:

Please make checks payable to: Rhode Island Airport Corporation

Rhode Island Airport Corporation
Attn: Aircraft Registrations
P.O. Box 845404
Boston, MA 02284-5404

AIRCRAFT INFORMATION

1. FAA REG NO. _____ YEAR _____ MAKE _____ MODEL _____ COLOR _____
AIRCRAFT SERIAL # _____ GROSS WEIGHT (LBS) _____ NO. OF SEATS _____
AIRCRAFT TYPE HELICOPTER EXPERIMENTAL PRIVATE CORPORATE
 SINGLE ENGINE MULTI-ENGINE RECIPROCATING ENGINE JET ENGINE

PRIMARY OWNER INFORMATION

1. OWNER _____ 4. PHONE #S (HOME) _____
2. COMPANY _____ (CELL) _____
3. ADDRESS _____ (WORK) _____

5. E-MAIL ADDRESS _____
6. PRINCIPAL BASE AIRPORT IN STATE OF RI _____
7. DEALER OR PRIVATE _____

Registration Fee Calculation

Aircraft Dealer	\$25
Less than 2,000 lbs	\$30
2,001 - 3,000 lbs	\$60
3,001 - 4,000 lbs	\$110
4,001 - 12,500 lbs	\$160
Over 12,500 lbs	\$250

Aircraft Dealer's must pay \$50 for Dealer Certificate

EMERGENCY CONTACT INFORMATION

8. EMERGENCY CONTACT _____
9. RELATIONSHIP _____
10. EMERG PHONE # _____

I declare under the penalty of perjury that I own the aircraft herein described and that any sales tax due has been paid and that, to the best of my knowledge and belief, all statements made herein are true and correct.

11. PRIMARY OWNER SIGNATURE _____ DATE _____

If the aircraft being registered is owned by more than one person, one of the co-owners is to sign as the primary on the application above, and the other co-owners should counter sign below. This indicates consent to the issuance of the certificate in the name of the co-owner.

NAME _____	SIGNATURE _____
NAME _____	SIGNATURE _____
NAME _____	SIGNATURE _____
NAME _____	SIGNATURE _____

FOR OFFICIAL USE			
	Reg. Period	Amount Paid	Date Received
AIRCRAFT TAIL # _____	2012 - 2013	\$ _____	_____