

TEAR OFF
BEFORE USING

DEPARTMENT OF TRANSPORTATION
FEDERAL AVIATION ADMINISTRATION

SUPPLEMENTAL
INFORMATION

CERTIFICATION OF WAIVER OR AUTHORIZATION APPLICATION - PRIVACY ACT

The information on the accompanying form is solicited under authority of Federal Aviation Regulations Parts 91, 101, and 105.

Submission of the information is mandatory.

The purpose of this information is to establish eligibility for certificate of waiver or authorization

The data will be used for recordkeeping and statistical purposes.

Incomplete submission may result in delay or denial of your request.

FAA Form 7711-2 (8/08) Supersedes Previous Edition

DETACH THIS PART BEFORE USING



US Department of Transportation
Federal Aviation Administration

APPLICATION FOR CERTIFICATE OF WAIVER OR AUTHORIZATION

From Approved: O.M.B. No.2120-0027 01/31/2021

APPLICANTS - DO NOT USE THESE SPACES

Region

GLSD13

Date

05/20/2025

Action

☒ Approved

☐ Disapproved – "Explain under "Remarks"

Signature of authorized FAA representative

INSTRUCTIONS

Submit this application in triplicate (3) to any FAA Flight Standards district office.

Applicants requesting a Certificate of Waiver or Authorization for an aviation event must complete all the applicable items on this form and attach a properly marked 7.5 series Topographic Quadrangle Map(s), published by the U.S. Geological Survey (scale 1:24,000), of the proposed operating area. The map(s) must include scale depictions of the flightlines, showlines, race courses, and the location of the air event control point, Police dispatch, ambulance, and fire

fighting equipment. The applicant may also wish to submit photographs and scale diagrams as supplemental material to assist in the FAA's evaluation of a particular site. Application for a Certificate of Waiver or Authorization must be submitted 45 days prior to the requested date of the event.

Applicants requesting a Certificate of Waiver or Authorization for activities other than an aviation event will complete items 1 through 10 only and the certification, item 17, on the reverse.

1. Name of organization

Carson City Frontier Days, Inc.

2. Name of responsible person

Shawn M. Raya (Event Director)

3. Permanent mailing address

House number and street or route number

659 Inverness

City

Highland

State and ZIP code

Michigan 48357

Telephone No.

(248)762-5843

4. State whether the applicant or any of its principal officers/owners has an application for waiver pending at any other office of the FAA.

N/A

5. State whether the applicant or any of its principal officers owners has ever had its application for waiver denied, or whether the FAA has ever withdrawn a waiver from the applicant or any of its principal officers/owners.

N/A

6. FAR section and number to be waived

14 CFR Part 91, 91.119 (b) and (c) Minimum Safe Altitudes

7. Detailed description of proposed operation (*Attach supplement if needed*)

Hot Air Balloon Event with approximately 20 balloons involving two days of flights (June 6-7). Evening flights are scheduled June 6-7 and a morning flight is scheduled for June 7.

The event will be held at the City of Carson City Park in Carson City, Michigan.

8. Area of operation (*Location, altitudes, etc.*)

Within 10NM Radius of N43°10' 46.0" W084° 51' 25.0" located 11.1 nautical miles from KAMN on the 266° radial from SFC to 9,000 AGL See attac

9a. Beginning (*Date and hour*)

06/06/2025

18:00:00

b. Ending (*Date and hour*)

06/07/2025

21:16:00

10. Aircraft make and model (a)

Pilot's Name (b)

Certificate number and rating (c)

Home address (Street, City, State) (d)

see attached

► **ITEMS 11 THROUGH 16 TO BE FILLED OUT FOR AIR SHOW/AIR RACE WAIVER REQUESTS ONLY.**

11. The air event will be sponsored by:

Carson City Frontier Days, Inc.

12. Permanent mailing address	House number and street or route number 123 E. Main Street	City Carson City	State and ZIP code Michigan 48811	Telephone No. (989)763-0485
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13. Policing (Describe provisions to be made for policing the event.)

The 2024 Balloon Operations Manual will provide provisions of crowd and traffic control which will be performed by the event officials or local law enforcement, as appropriate, in the area or operations and all goals/targets.

14. Emergency facilities (Mark all that will be available at time and place of air event.)

- ☐ Physician
 ☐ Fire truck
 ☒ Other - Specify Reference Attached ERP
- ☐ Ambulance
 ☐ Crash wagon

15. Air Traffic control (Describe method of controlling traffic, including provision for arrival and departure of scheduled aircraft.)

A NOTAM will be required and place by Lockheed Martin advising traffic of numerous balloons in the area at varying altitudes from Friday June 6, 2025 through June 7, 2025; during the 3 hours after sunrise and 3 hours before sunset.

16. Schedule of Events (include arrival and departure of scheduled aircraft and other periods the airport maybe open.)

Hour (a)	Date (b)	Event (c)
18:00 - 21:17	June 6,2025	Hot Air Balloon Flight Activity
05:58 - 10:00	June 7, 2025	Hot Air Balloon Flight Activity
18:00 - 21:18	June 7, 2024	Hot Air Balloon Flight Activity

If sufficient space is not available, the entire schedule of events may be submitted on separate sheets, in the order and manner indicated above.

Please Read > The undersigned applicant accepts full responsibility for the strict observance of the terms of the Certificate of Waiver or Authorization, and understands that the authorization contained in such certificate will be strictly limited to the above described operation.

17. Certification - I CERTIFY that the foregoing statements are true.

Date 4/10/25	Signature of Applicant 
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Remarks

April 10, 2025

Shawn M. Raya, Commercial Pilot Certificate 3217534