DEPARTMENT OF TRANSPORTATION - FEDERAL AVIATION ADMINISTRATION  AIRPORT ACTIVITY SURVEY (By Selected Air Carriers)				FORM APPROVED		
· •				OMB NO. 2120-0067		
TWELVE-MONTH PERIOD COVERED  January 1 through December 31, 2007				FOR FAA USE ONLY		
DO NOT REPORT ACTIVITY PREVIOUSLY SUBMITTED ON BTS T-100 Form				Operator Identification		
				Year		
				Month		
				AIR TAXI/COMMERCIAL CERTIFICATE NUMBER		
ADDRESS CORRECTION REQUESTED				Page of	f Pages	
OPERATIONS DURING 12-MONTH PERIOD COVERED						
DEPARTURE AIRPORT				ENPLANEMENTS		
СІТУ	STATE	AIRPORT NAME	LOCATION IDENTIFIER	NUMBER OF SCHEDULED ENPLANEMENTS (See Instructions)	NUMBER OF NONSCHEDULED ENPLANEMENTS (See Instructions)	
<del>-</del> 1						
<del>-</del> 1						
<u> </u>						
1						
<u> </u>						
1						
I certify, under penalty of perjury, that the information provided in this Airport Activity Survey (Form 1800-31) is true and correct to the best of my knowledge, information and belief.						
DATE		TITLE OF PREPARING OFFICIAL	SIGNATURE			

## **INSTRUCTIONS**

The information requested on this form is voluntary, but is essential for the FAA to fairly allocate Airport Improvement Program (AIP) passenger entitlement funds to the airports you serve, as required by Title 49 of United States Code.

This survey is restricted to on demand operations that are <u>NOT reported to the Office</u> of <u>Airline Information</u>, <u>Bureau of Transportation Statistics (BTS)</u>, <u>Department of Transportation</u>.

Nonscheduled (charter) activity subject to the passenger transportation tax should be reported. Carriers not required to report to BTS because they conduct less than 5 round trips between two points should report revenue enplanements on this form.

**About this form:** Please notify your General Aviation District Office of any differences in your name, address or FAA Air Taxi / Commercial Operator Certificate Number from that already printed on this form. In addition, you may submit any changes with the attached form.

Type of operation: If you conducted charter operations, enter the number of Nonscheduled Enplanements in the last column. If you provide regular round trip air service between two or more airports several times per week, the flight schedule is available to the public, and the flight occurs regardless of the number of passengers onboard, enter the number of revenue passengers that boarded those flights in the Scheduled Enplanement column. If you conducted both scheduled and nonscheduled operations, enter the scheduled enplanements in the scheduled column and the nonscheduled enplanements in the nonscheduled column.

**Operations:** Consolidate all enplanements executed in one airport and report them as one line record. Show the data for each airport on a separate line. Give the number of scheduled, if any, and nonscheduled (charter) passengers enplaned at each airport. An enplaned passenger is a revenue passenger who boarded the flight at that airport. If the number of lines required is more than those provided on the form, please reproduce it for continued entries.

You must certify, under penalty of perjury, that the information provided in this Airport Activity Survey Form (1800-31) is true, correct and complete to the best of your knowledge, information and belief. The certification represents that your files, records, documents, and data have not been manipulated or falsified in an effort to receive a more favorable allocation of AIP funds. A false, fictitious, or fraudulent certification may be subject to criminal and/or civil prosecution, as well as appropriate administrative action.

When submitting the form with handwritten data, please make sure that the information is legible.

If you had no commercial or air taxi activity during the reporting period, please indicate this across the face of the form and return it in the self-addressed envelope provided. If there are any questions regarding the completion of this form, please contact FAA Headquarters, National Planning & Environmental Division, telephone number 202-267-8739.

Sign and date FAA Form 1800-31 in the spaces provided, and mail it to:

L-3 Services Group -EITS Attention: ACAIS 11955 Freedom Drive Suite 10000 Reston, VA 20190

Email Electronic Copies in excel format to Sharon.Glasgow@faa.gov