



HELISPECS AVIATION PTY LTD



HELISPECS AVIATION NEIGHBOUR AUTHORISATION FOR AERIAL APPLICATION

CLIENT / COMPANY NAME
PROPERTY ADDRESS Town: State: Postcode:
CONTACT DETAILS	Mobile No: Email Address:

NEIGHBOURING PROPERTY

TO WHOM IT MAY CONCERN, I hereby give permission for the above and Helispecs Aviation Pty Ltd to apply pesticides/other products by aircraft within 150 metres of my dwelling for the above property, and whilst doing so, fly within 100 metres horizontally and 350ft vertically from my dwelling.

.....
SIGNATURE OF OWNER OR OCCUPIER: **DATE:**/...../ 20.....

.....
FULL NAME (please print) **MOBILE NO.**

.....

.....

TOWN:

STATE: POSTCODE:
ADDRESS.

THANK YOU - YOUR ASSISTANCE IS APPRECIATED
HELISPECS AVIATION PTY LTD
Mobile: 0429 621 565
Email: agops@helispecs.com.au

PRECISION AERIAL APPLICATION & AIRBORNE SOLUTIONS