

## **CURFEW REPORT**

| TO: Access & Noise Office                         | EMAIL:<br>jwaano@ocair.com  | FAX: (949) 252-5178                |              |
|---|-----------------------------|------------------------------------|--------------|
| Per Section 8.5.2 of the Phase 2 Co<br>submitted. | ommercial Airline Access    | Plan, the following curfew repo    | rt is        |
| Carrier:  |                             |                                    |              |
| Flight Number:                                    |                             |                                    |              |
| Date of Operation:                                |                             |                                    |              |
| Operation Type:                                   | Arriv                       | <i>r</i> al<br>arture              |              |
| Actual Arrival/Departu                            | ure Time:                   |                                    |              |
| Aircraft Type:                                    |                             |                                    |              |
| Origin/Destination:                               |                             |                                    |              |
| Acceptable Reasons for Delay                      | ys:                         |                                    |              |
| ATC   | Mecha                       | anical                             |              |
| Emerg   | ency/Security               | ner                                |              |
| Where Did The Cause Of The                        | Delay Occur?:               |                                    |              |
| Arrival - Delay at Orig                           | inating Airport (Leg/Stop I | mmediately Before JWA)             |              |
| Arrival/Departure – D                             | elay at JWA                 |                                    |              |
| Departure – Delay at                              | Destination Airport (Leg/S  | top Immediately Following JWA)     |              |
| Supporting Document:                              | Attached Inten              | t to submit within 10 days of curf | ew operation |
| Name of <u>Airline personnel requesting</u>       | curfew extension:           |                                    |              |
| Name of <u>JWA personnel authorizing</u>          | curfew extension:           |                                    |              |
| Date and Time called for curfew exte              | nsion:                      |                                    |              |
| Curfew extension length (minutes): _              |                             |                                    |              |
| Describe in detail the specific circu             | umstances for this reque    | est:                               |              |
|   |                             |                                    |              |
|   |                             |                                    |              |
|   |                             |                                    |              |
|   |                             |                                    |              |
| Signature:Station Manager/Carrie                  | er Representative           | Date:                              |              |

\*Curfew Report Must Be Submitted To Access & Noise Office Within 48 Hours Of Operation\*