



State of Vermont

Division of Policy, Planning & Intermodal Development

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Agency of Transportation

Aeronautics Administrator

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FLIGHT REQUEST FORM

Office of the Governor
NAME OF REQUESTOR / AGENCY

8-5-2014
REQUEST DATE
(MM/DD/YYYY)

8-12-14	Rutland	12:45
PROPOSED FLIGHT DATE	DESTINATION	DESTINATION ARRIVAL TIME
(MM/DD/YYYY)		

Dick KD in Rutla 1 at 7:30pm

meeting in Rutland, Bennington & Arlington

BRIEFLY DESCRIBE THE PURPOSE OF THE FLIGHT

	PASSENGER NAMES	PASSENGER WEIGHT (LBS.)
1	Gov Peter Shvrm/m	185
2	Staff - TBD	
3		

WB INFO.

0

FLIGHT COST ESTIMATOR *

FLIGHT LEG	DEP	ARR	FLIGHT TIME	UNIT COST	FLIGHT LEG COST
1				\$188	\$0.00
2				\$188	\$0.00
3				\$188	\$0.00
4				\$188	\$0.00

TOTAL

	\$0.00
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Sana Ali Pura
REQUESTOR APPROVAL / DATE

AERONAUTICS ADMINISTRATOR / DATE
IN STATE APPROVAL

VTRANS DIVISION DIRECTOR / DATE
OUT OF STATE APPROVAL

* Flight Scheduler will calculate the approximate flight time based on information provided. It is ultimately the responsibility of the requesting Entity to determine if it is cost effective to fly in lieu of an alternate means of transportation. Other costs may be associated with the flight.