State of Alaska
Department of Transportation & Public Facilities
Airport Manager's Office

_____ Airport

NOTICE TO AIRMEN

From: _____, Airport Manager Date: _____

To: FAA ☐ Flight Service Station ☐ Tower Local Time: _____ ☐ AM ☐ PM

Address: _____

_____

Content: _____

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Distribution:
☐ FSS or Tower
☐ Regional Files
☐ Airport Files

_____
Tower or FAA Operator's Signature
(Not required if no FAA Facility Available)

_____
Airport Manager's Signature

NOTAM CANCELLATION

Date Canceled: _____ Local Time: _____ ☐ AM ☐ PM

_____
Airport Manager's Initials