



Federal Aviation Administration  
U. S. Department of Transportation

**PASSENGER FACILITY CHARGE (PFC) APPLICATION**

**1. Application Type** (Check all that apply)

- a. Impose PFC Charges
- b. Use PFC Revenue
- c. Amend PFC No. \_\_\_\_\_

FAA USE ONLY

Date Received \_\_\_\_\_

PFC Number \_\_\_\_\_

**PART I**

**2. Public Agency Name, Address, and Contact Person**

Agency Name Pinellas County

Address 14700 Terminal Blvd, Ste 221

City, State, ZIP Clearwater, FL 33762

Contact Person Yvette Aehle, Deputy Director of Finance and Administration (727) 453-7804

**3. Airport(s) to Use**

**ST. PETE-CLEARWATER INTERNATIONAL AIRPORT (PIE)**

**4. Consultation Dates**

a. Date of Written Notice to Air Carriers: **January 13, 2021**

b. Date of Consultation Meeting with Air Carriers: **February 17, 2021**

c. Date of Public Notice: **January 13, 2021**

**PART II**

**5. Charges**

a. Airport to Impose

b. Level

c. Total Estimated PFC Revenue by Level

d. Proposed Effective Date:

e. Estimated Expiration Date:

**ST. PETE-CLEARWATER INTERNATIONAL AIRPORT (PIE)**

\$1.00  \$2.00  \$3.00

\$4.00  \$4.50

Impose

Use

Impose **\$6,660,000**

Use **\$6,660,000**

**June 1, 2023**

**February 1, 2025**

**PART III**

**6. Attachments** (Check all that Apply)

Attached

Submitted with Application Number

Document

- a.
- b.
- c.
- d.
- e.
- f.
- g.
- h.
- i.

- \_\_\_\_\_
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- Airport Capital Improvement Plan
- Project Information (Attachment B)
- Air Carrier Consultation and Public Notice Information
- Request to Exclude Class(es) of Carriers
- Alternative Uses/Projects
- Competition Plan/Update
- ALP/Airspace/Environmental
- Notice of Intent Project Information
- Additional Information

**PART IV**

**7. With respect to this PFC application I hereby certify as follows:**

To the best of my knowledge and belief, all data in this application are true and correct;  
This application has been duly authorized by the governing body of the public agency;  
The public agency will comply with the assurances (Appendix A to Part 158) if the application is approved;  
For those projects for which approval to use PFC revenue is requested, all applicable ALP approvals, airspace determinations, and environmental reviews required by the National Environmental Policy Act have been completed.  
If required, the public agency has submitted a competition plan in accordance with 49 U.S.C. 47106(f); and  
If required by 49 U.S.C. 40117(d)(4), adequate provision for financing the airside needs, including runways, taxiways, aprons, and gates, has been made by the public agency.

a. Typed Name of Authorized Representative

b. Title  
**Pinellas County Board of County Commissioners Chair**

c. Telephone Number  
**(727) 464-3276**

**Dave Eggers**

d. E-mail Address  
**deggers@pinellascounty.org**

e. Fax Number  
**(727) 464-3022**

f. Signature of Authorized Representative

*Dave Eggers*



g. Date Signed

February 23, 2021

**Paperwork Reduction Act Statement:** A federal agency may not conduct or sponsor, and a person is not required to respond to, nor shall a person be subject to a penalty for failure to comply with a collection of information subject to the requirements of the Paperwork Reduction Act unless that collection of information displays a currently valid OMB Control Number. The OMB Control Number for this information collection is 2120-0557. Public reporting for this collection of information is estimated to be approximately 5-80 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, completing and reviewing the collection of information. All responses to this collection of information are required to obtain FAA approval of authority to collect PFC revenue (49 U.S.C. 40117(c)). Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to: Information Collection Clearance Officer, Federal Aviation Administration, 10101 Hillwood Parkway, Fort Worth, TX 76177-1524.

**APPROVED AS TO FORM**

ATTEST: KEN BURKE, CLERK  
By: *Ken Burke*  
Deputy Clerk

By: *Michael A. Zas*  
Office of the County Attorney