## HANGAR CANCELLATION FORM

Hangar Number:		
Forwarding Address		
Owner(s):		
Address:		
City, State, Zip:		
Phone:	Email:	
<u>Cancellation</u>		
Reason for Cancellation:		
Expiration Date:	(last day of lease)	
_	ent states that the lease "shall continue on a mor Tenant upon <b>thirty (30) days prior written notic</b>	
By signing this form, I acknowledg Agreement for Hangar Space at th	ge that the above information is correct and I am he Manassas Regional Airport.	n cancelling my Lease
Printed Name	 Date	
Signature		
The hangar has been inspecte	d and is in good condition. Date:	Initials:

The City of Manassas Treasurer's Office will invoice you for the final rent amount as determined by your cancellation notice and account balance. Any deposits on your account will be released once your account is settled and any damages deducted.

Questions? Call or email Airport Operations at 703-361-5488 or <a href="mailto:hefops@manassasva.gov">hefops@manassasva.gov</a>