



City of Manassas Airport Director's Office

TIE-DOWN CANCELLATION FORM

Tie-down Number _____

Forwarding Address

Owner(s): _____

Address: _____

City, State, Zip: _____

Phone: _____

Email: _____

Cancellation

Reason for Cancellation: _____

Expiration Date: _____ *(last day of lease)*

Paragraph D of the Lease Agreement reads as follows: "This lease is effective from the date of signing hereof to the end of the month and shall continue on a month-to month basis, commencing on the 1st day of each month and ending on the last day of each month (the "term"), unless sooner terminated in writing by either party, with or without cause, upon **thirty (30) days prior written notice.**"

By signing this form, I acknowledge that the above information is correct and I am cancelling my tie-down agreement at the Manassas Regional Airport.

Printed Name

Date

Signature

Questions? Call or email Airport Operations at 703-361-5488 or
hefops@manassasva.gov

Form must be returned to Airport Operations