

**TULSA AIRPORTS IMPROVEMENT TRUST  
NOISE MITIGATION PROGRAM**

**REQUEST FOR HARDSHIP**

I (we) \_\_\_\_\_ certify that I (we) am the owner(s) of the property located at \_\_\_\_\_ and more particularly described as:

I (we) have requested to participate in the Tulsa Airports Improvement Trust Noise Mitigation Plan (hereinafter "NMP") pursuant to a Participant Authorization Agreement executed by me (us) dated \_\_\_\_\_.

I (we) have a medical condition and/or financial hardship that I (we) believe qualifies me (us) for priority in the timing of my (our) participation in the NMP.

I (We) am (are) requesting hardship because:

- I (we) have a medical/health condition. I have attached a letter from a qualified medical practitioner or other health professional which describes my (our) condition and the effect this has upon me (us).
- I (we) have a disability. I (We) have attached a letter from a qualified medical practitioner or other health professional which describes the disability and the effect this disability has upon me (us).
- I (we) have an immediate financial emergency or hardship. I (we) have attached an order of a court or other written verification of my (our) financial hardship from an employer, a financial institution, an attorney, a government agency or other credible source.

I (we) understand that my (our) participation in the NMP option that I (we) have selected will in every other way be identical to that of participants with no hardship determination.

I (we) certify that I (we) am (are) the sole owner(s) of the described property above.

\_\_\_\_\_  
Owner

\_\_\_\_\_  
Date

\_\_\_\_\_  
Owner

\_\_\_\_\_  
Date