

MAY 16 12:07

Permission is hereby granted to the Pacific Soaring Council, Inc. (PASCO), 4070 Glider Rd., Placerville, California 95667 for the purpose of a soaring event known as "Wave Camp" 13-21 May, 1989 and Region II Soaring Championships June 30 through July 6, 1989 during the following times only:

May 13, through May 21, 1989

June 30, through July 6, 1989

Property to be used:

Glider Concession/Camping Area (Exhibit "A")

Subject to the following terms and conditions:

1. FEE - For use of the above property shall be the established tie-down and camping fees, payable to Soar Minden, the Glider Concessionaire.

2. INSURANCE - Permittee, shall, as an express condition precedent to the operative effect of this permit, deposit with the Airport Manager, prior to the use of the Airport property, policies or evidence of insurance in the following form and amounts: ONE MILLION DOLLARS (\$1,000,000.00) bodily injury and property damage for the duration of the event. The County of Douglas, its boards, officers, and employees shall be named as additional insureds.

3. The grant of the permission shall not constitute a deed or grant of an easement by the County, is not transferable or assignable, is revocable at any time without notice, and is subject to the express condition precedent that the use of the property referred to in this permit may from time to time be granted to other individuals or entities, and that the

County reserves the right to determine which entity or entities or persons shall have the use of any facility on any given day or days, regardless of the time in making application therefor so that the use of such facilities shall be on an equitable basis and not be monopolized by any one person, firm, corporation or entity. The decision of the County with regard to the granting of such permission and the dates of such use shall be final and conclusive.

4. Permittee expressly agrees and does hereby save the County of Douglas, its boards, commissions, officers, agents and employees harmless from any and all damages or claims for damages for personal injuries or death to any persons, or property belonging to the County. Permittee further agrees to promptly pay any just claims therefor. Neither the County nor any commission, board, officers, agent or employees thereof shall be held responsible or liable for damage to any person or to any property of Permittee or any third person, firm or corporation located, situated or installed on the property referred to in the permit regardless of the cause of any such damage or loss. The County shall not waive any rights against Permittee which it may have by reason of the aforesaid hold harmless agreement because of the acceptance by the County of a deposit to the County by Permittee of any of the insurance policies or certificates described in this permit.

5. Permittee shall deposit \$500.00 with the Airport Manager as a cleanup deposit. This amount of portion thereof shall be refunded upon inspection of the premises subject to the cleanup of the area used to its original condition prior to the event.

6. Permittee shall conform to all Airport Rules, Regulations and safety requirements, adapted by Board of Commissioners on April 3, 1986.

7. Permittee shall provide trash receptacles and remove all trash from the premises after completion of use of the Airport.

8. Permittee shall provide chemical toilets.

9. Permittee shall provide crowd and ground vehicle control to ensure that the people and vehicles are confined within the designated areas and do not create a safety hazard to other airport operations.

10. Permittee acknowledges and agrees that fire fighting aircraft shall have priority with respect to landings and takeoffs over all other aircraft and that it will refrain from doing anything that will interfere with this property.

11. The County reserves the right to close the airport to any and all operations when it deems it necessary due to emergencies or major construction.

12. All vehicles and people (except wing walkers) will remain clear of the runway Obstacle Free Zone (250 feet from R/W16/34 runway centerline) marked with yellow stripe on each side of runway staging area and 125 feet on runway 12/30. In addition, vehicles and people must also remain clear of Taxiway Obstacle Free Zone, 75 feet from taxiway centerline (identified by yellow stripe) except during staging glider/aircraft into position for takeoff. Only wing walkers will be allowed beyond the taxiway staging area. All vehicles operating in or through these areas are to have checkered flag and a hand held radio.

ACCEPTANCE

Permittee hereby accepts the foregoing and hereby expressly agrees to the terms and conditions hereinabove set forth.

Approved and Recommended As to Content:

Joe Martin
Airport Manager

Approved As to Form:

Robert W. Strong
District Attorney

BOARD OF COUNTY COMMISSIONERS
DOUGLAS COUNTY, NEVADA

PACIFIC SOARING COUNCIL, INC.

By: [Signature]

By: [Signature]
~~John~~ Sinclair, President
JOHN

ATTEST:

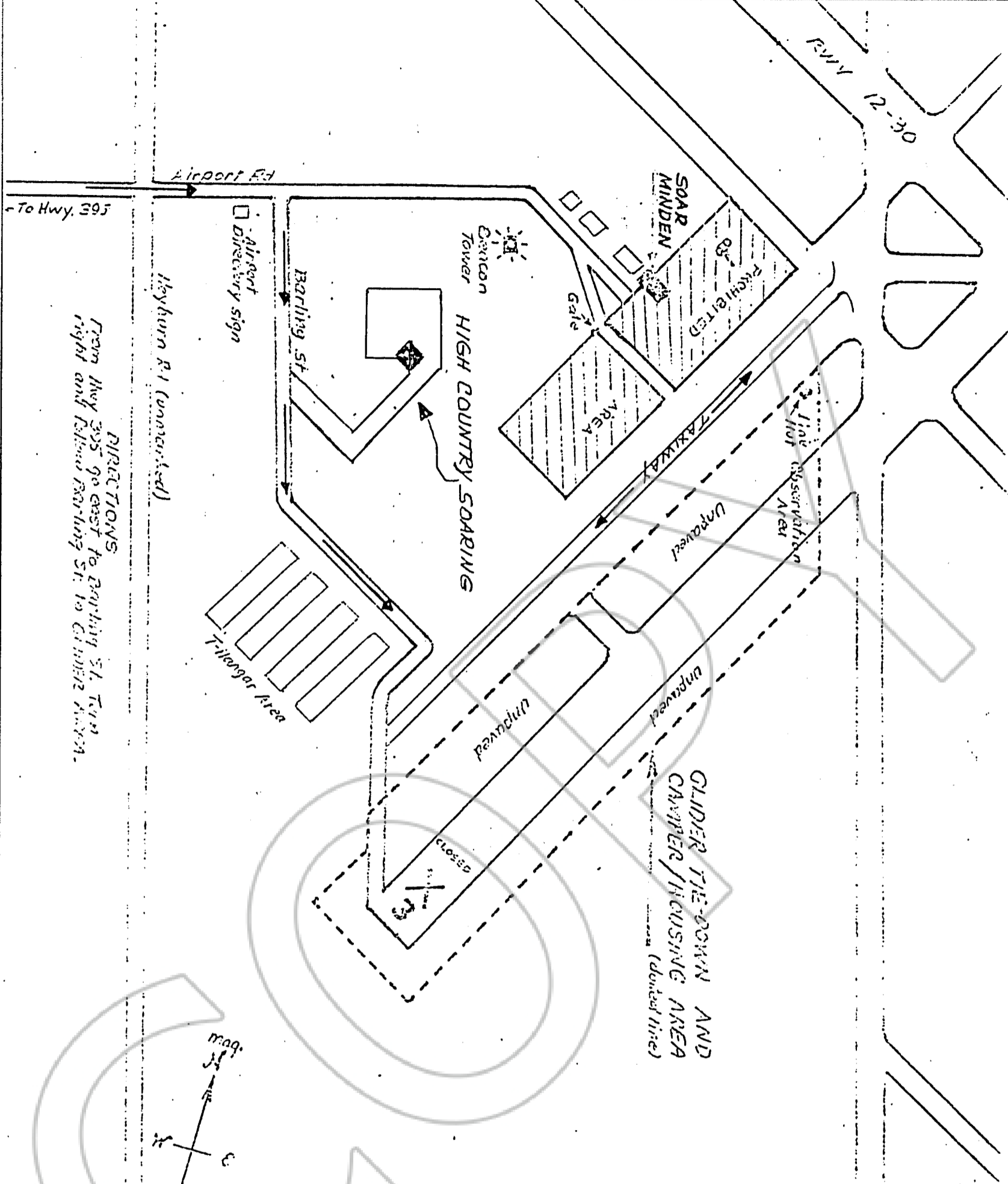
Dated: 4-12-89

Barbara J. Reed
BARBARA J. REED, CLERK

by: J. Hoffman
Deputy

202116

BOOK 589 PAGE 2068



DIRECTIONS
 From Hwy 395 go east to Barling St. Turn
 right and follow Barling St. to Glider Area.

EXHIBIT "A"

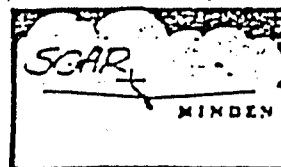
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BOOK 589 PAGE 2069

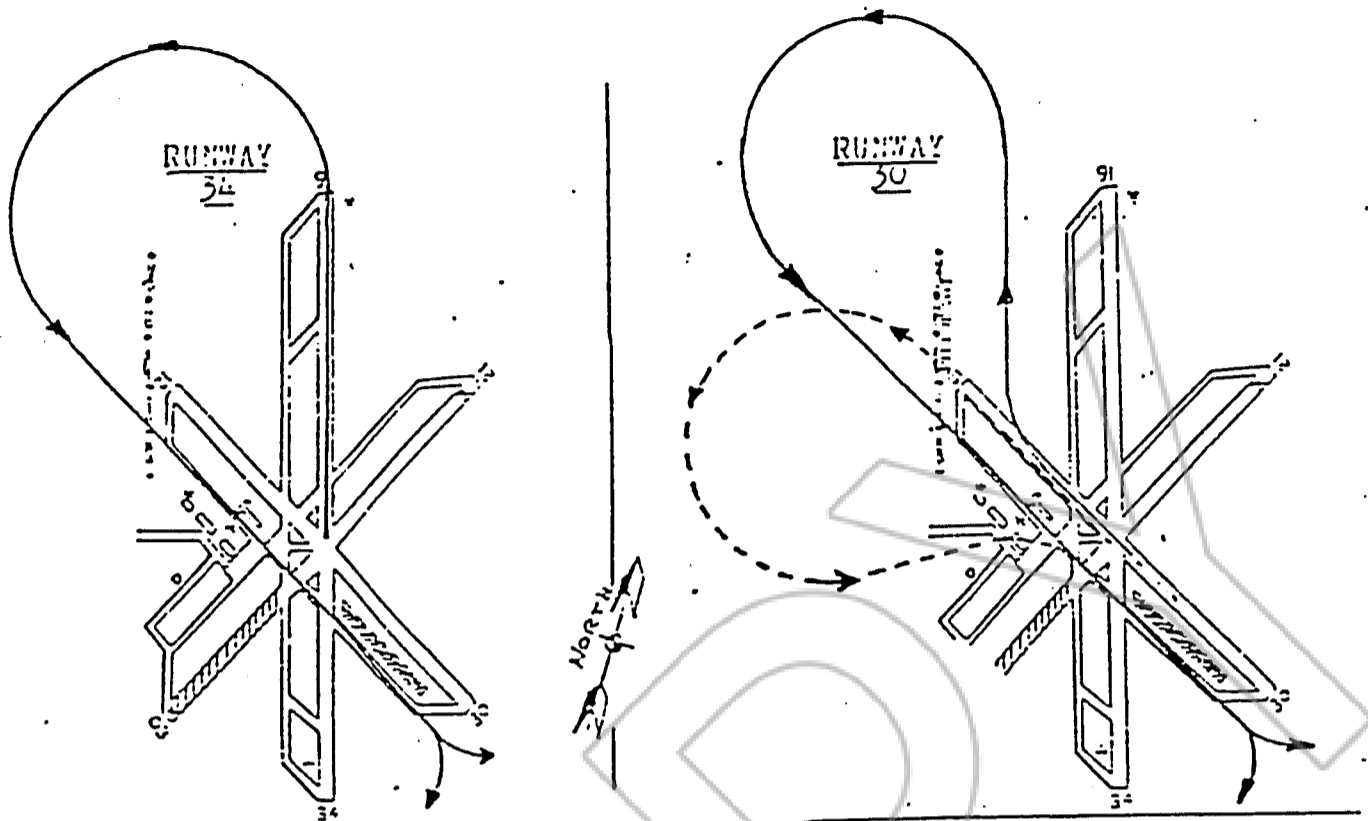


TOW PILOT INFORMATION

THIS INFORMATION IS GIVEN AS A GENERAL GUIDE LINE FOR DIFFERENT RUNWAYS



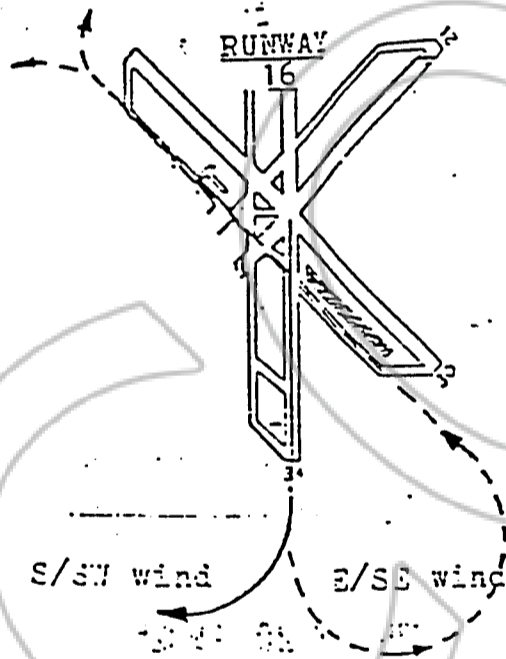
An emergency may occur during the tow, adjusting your tow plane pattern according to the wind, the type and weight of the glider should help the glider pilot to be in the best condition to meet that emergency.



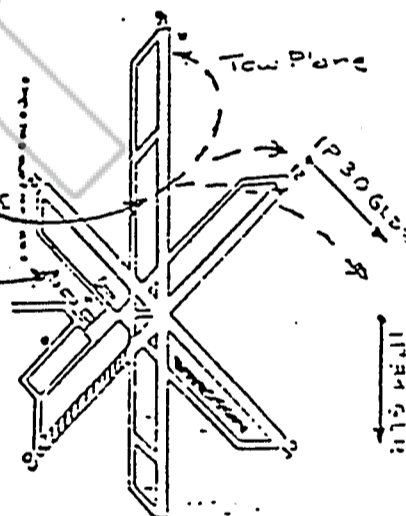
Have a radio check with the glider before take-off.

In case of an aborted take-off; give radio info: ".... aborted take-off"

1,000 ft traffic pattern



initial track
RWY 34 or 30
Then // to
RWY 05



In case of take-off RWY 16:
Brief the glider pilot on the
direction of your turn out.

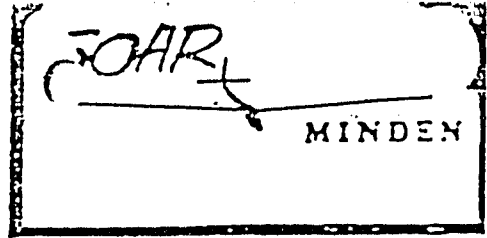
In case of rope break: give info "...ROPE BREAK". Then if the glider pilot has enough time, info from glider: "RWY used & EORR pattern".

202116

BOOK 589 PAGE 2070

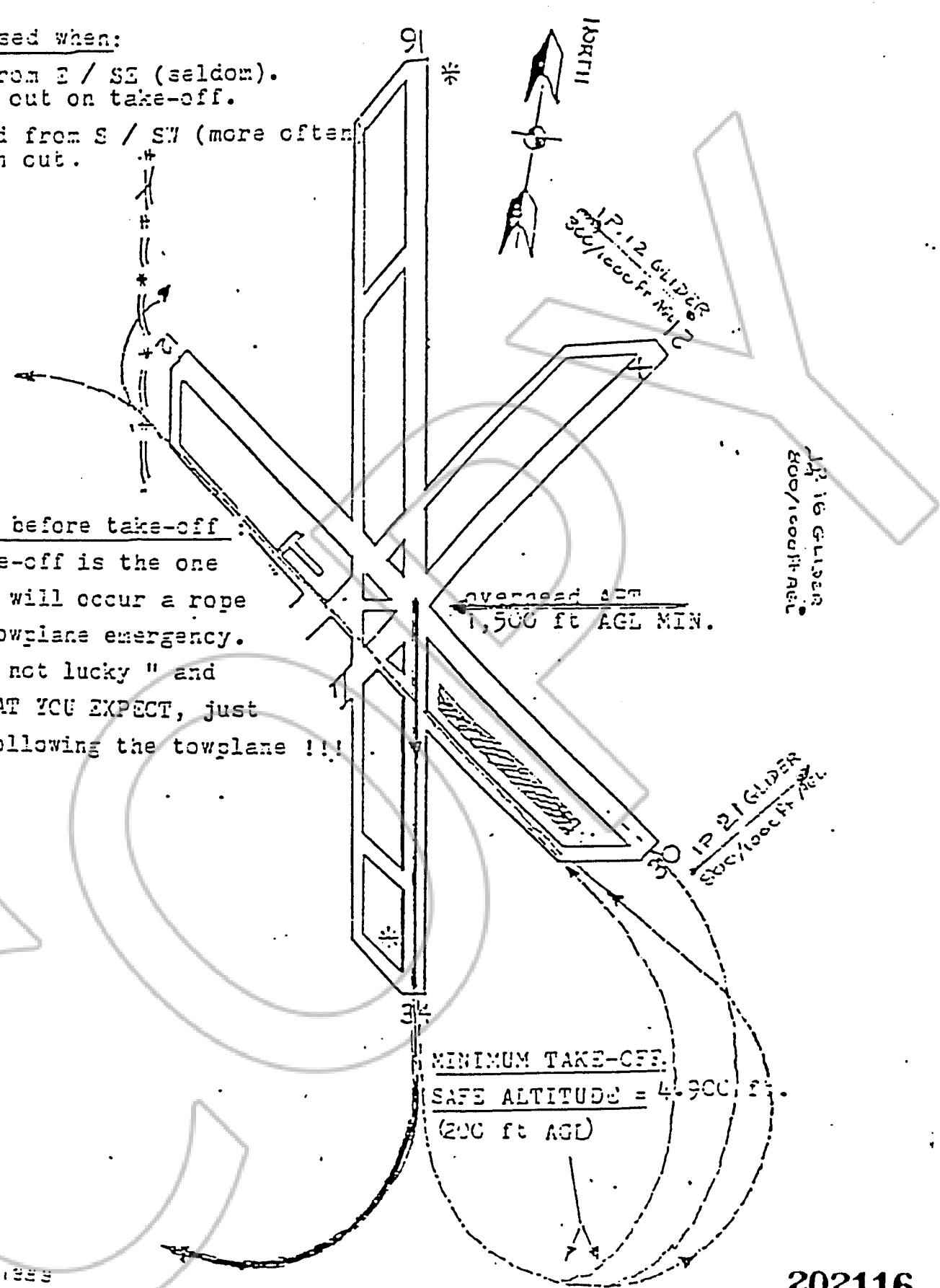


TAKE-OFF RUNWAY 16



RTW-16 is used when:

- Wind is from E / SE (seldom).
Left turn out on take-off.
- Strong wind from S / SW (more often).
right turn out.



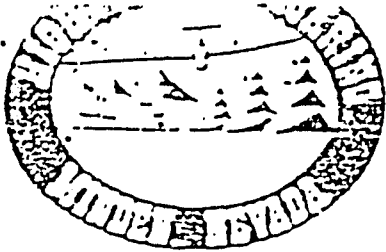
Keep in mind before take-off :

A normal take-off is the one during which will occur a rope break or a towplane emergency. " If you are not lucky " and don't get WHAT YOU EXPECT, just keep following the towplane !!!

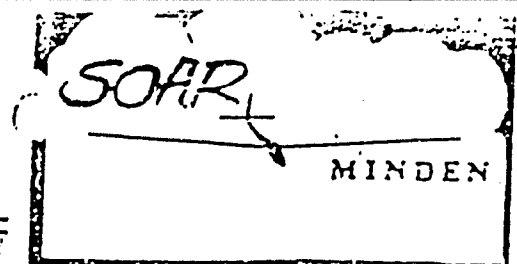
Jan. 1999

202116

BOOK 589 PAGE 2071



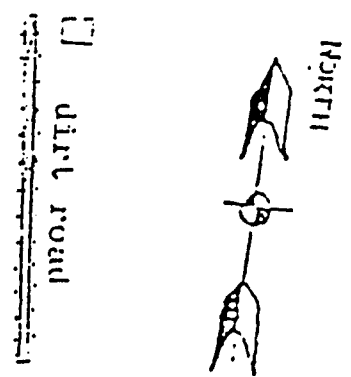
TAKING OFF RUNWAY 30



T.C. BEFORE INTERSECTION

T.C. AT INTERSECTION

If no wind condition, only dry single seat will be towed from that point (H.C.S. only)

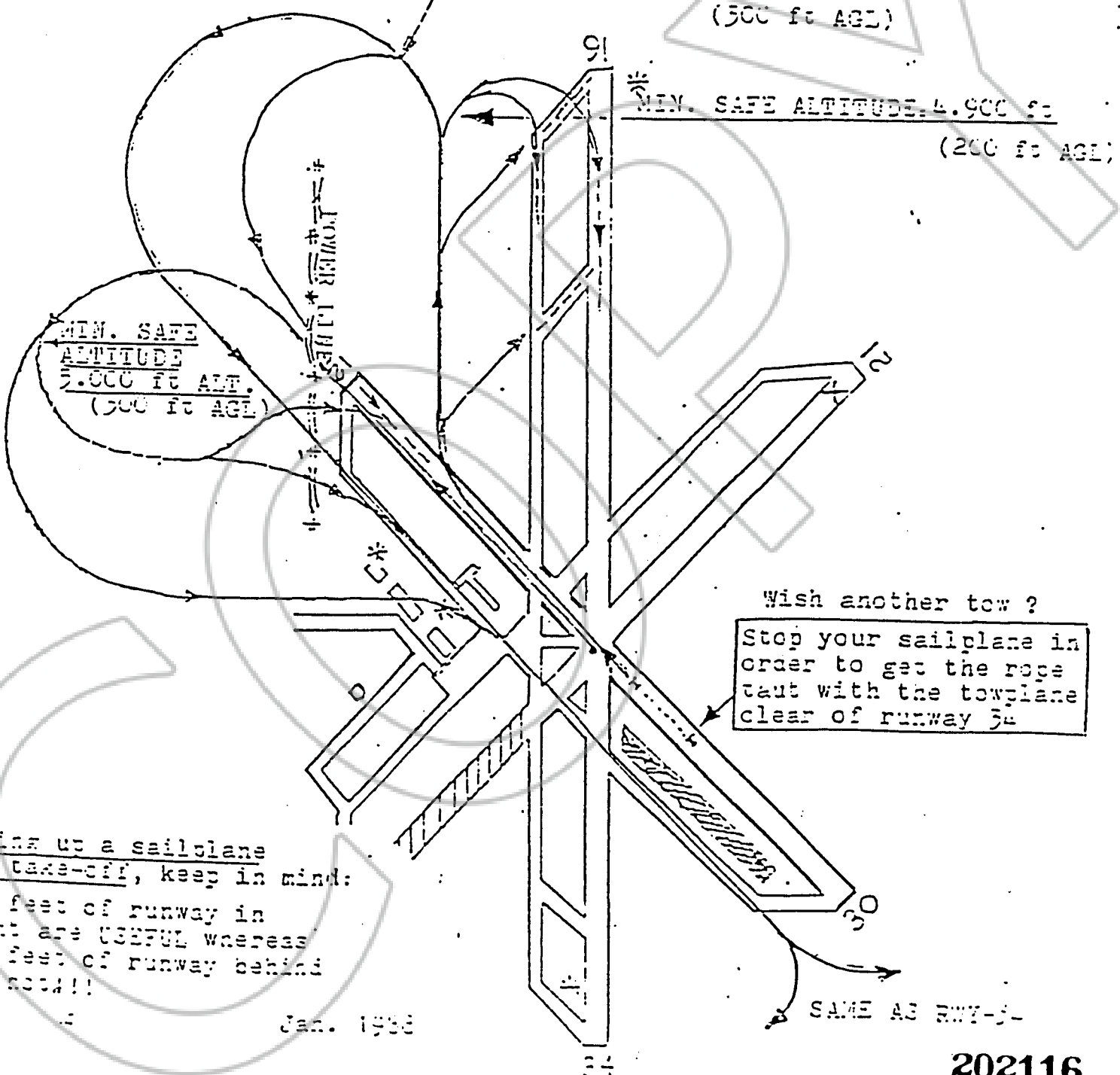


MIN. SAFE ALTITUDE = 5,000 ft

(500 ft AGL)

MIN. SAFE ALTITUDE = 4,900 ft

(200 ft AGL)



MIN. SAFE ALTITUDE 5,000 FT ALT. (500 ft AGL)

Wish another tow?
Stop your sailplane in order to get the rope taut with the towplane clear of runway 30

Rising up a sailplane for take-off, keep in mind:

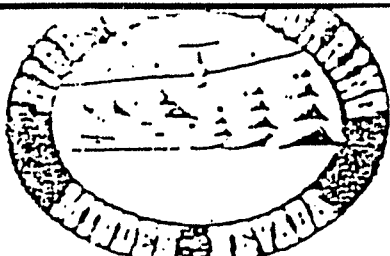
The feet of runway in front are USEFUL whereas the feet of runway behind are NOT!!!

Jan. 1968

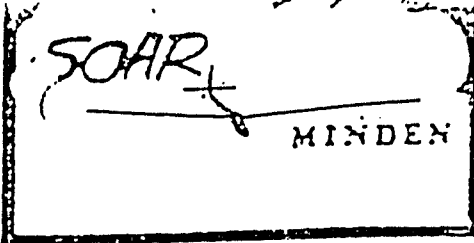
SAME AS RWY-3-

202116

BOOK 589 PAGE 2072



TAKE OFF RUNWAY 34



TOWPLANE-GLIDER

GLIDER EMERGENCY

TOWPLANE TR.PAT

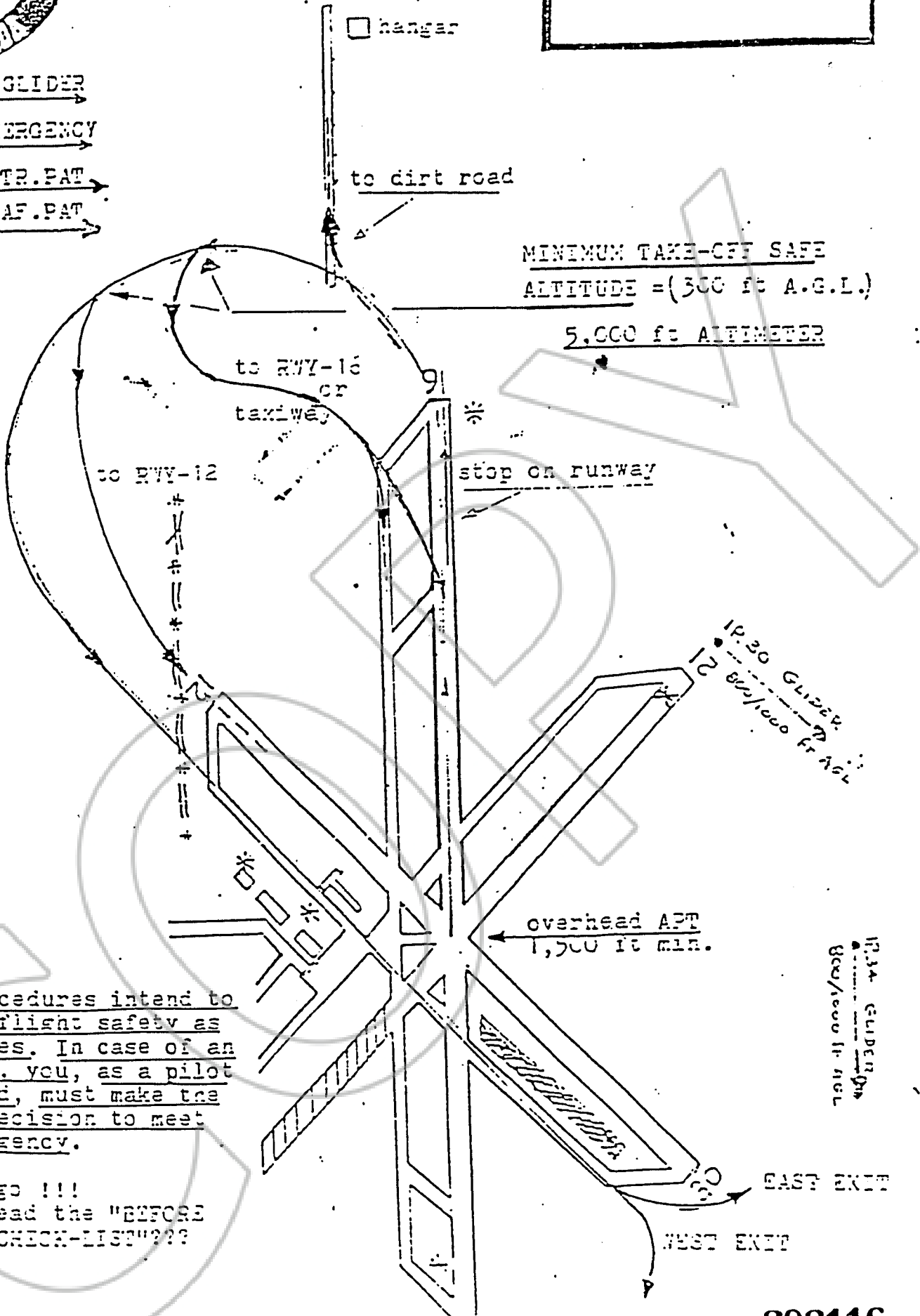
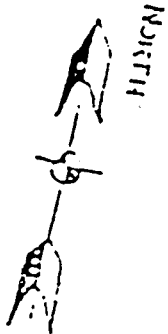
GLIDER TRAF.PAT

hangar

to dirt road

MINIMUM TAKE-OFF SAFE ALTITUDE = (300 ft A.G.L.)

5,000 ft ALTIMETER



These procedures intend to increase flight safety as guide lines. In case of an emergency, you, as a pilot in command, must make the correct decision to meet that emergency.

Ready to go !!!
Did you read the "BEFORE TAKE-OFF CHECK-LIST"???

202116

BOOK 589 PAGE 2073

CERTIFICATE OF INSURANCE

ISSUE DATE (MM/DD/YY)
2/27/89

PRODUCER

Carroll & Associates, Inc.
P.O. Box 28280
Tempe, AZ 85282

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.

COMPANIES AFFORDING COVERAGE

INSURED *PASCO AND*
Bay Area Soaring Association
Attn: Gary Kemp
P.O. Box 1576
Fremont, CA 94538

COMPANY LETTER	A	Southern Aviation Insurance
COMPANY LETTER	B	
COMPANY LETTER	C	
COMPANY LETTER	D	
COMPANY LETTER	E	

THIS IS TO CERTIFY THAT POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS, AND CONDITIONS OF SUCH POLICIES.

TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIABILITY LIMITS IN THOUSANDS	
				EACH OCCURRENCE	AGGREGATE
GENERAL LIABILITY <input type="checkbox"/> COMPREHENSIVE FORM <input checked="" type="checkbox"/> PREMISES OPERATIONS UNDER 100,000 <input type="checkbox"/> EXPLOSION & COLLAPSE HAZARD <input type="checkbox"/> PRODUCTS COMPLETED OPERATIONS <input type="checkbox"/> CONTRACTUAL <input type="checkbox"/> INDEPENDENT CONTRACTORS <input type="checkbox"/> BROAD FORM PROPERTY DAMAGE <input type="checkbox"/> PERSONAL INJURY	AJM-10134	5/13/89	5/21/89	BODILY INJURY PROPERTY DAMAGE BI & PD COMBINED	\$1,000, \$1,000,
AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS <input type="checkbox"/> GARAGE LIABILITY				BODILY INJURY PER PERSON BODILY INJURY PER ACCIDENT PROPERTY DAMAGE BI & PD COMBINED	
CESS LIABILITY <input type="checkbox"/> GENERAL FORM <input type="checkbox"/> WITH OR WITHOUT UMBRELLA FORM				BI & PD COMBINED	
WORKERS' COMPENSATION AND EMPLOYERS' LIABILITY				STATUTORY EACH ACCIDENT DISEASE-POLICY LIMIT DISEASE EACH EMPLOYEE	
OTHER					

EVENTS (OPERATIONS/LOCATIONS/VEHICLES/SPECIAL ITEMS)
 Events: Wave Camp at Minden, Nevada from May 13-21, 1989. Additional Insured: PASCO & Douglas County Commissioners and Employees, for liability as respects the negligent and insured acts of the named insured.

CERTIFICATE HOLDER

Douglas County
Commissioners & Employees
P.O. Box 218
Minden, NV 89423

BOOK 589 PAGE 2074

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING COMPANY WILL ENDEAVOR TO MAIL _____ DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE COMPANY OR ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE
Pat Costello *Pat Costello*

CERTIFICATE OF INSURANCE

ISSUE DATE (MM DD YY)

2/28/89

PRODUCER

Carroll & Associates, Inc.
P.O. Box 28280
Tempe, AZ 85282

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.

COMPANIES AFFORDING COVERAGE

INSURED

Pacific Soaring Council
P.O. Box 405
Willows, CA 95988

COMPANY LETTER	A Southern Aviation Insurance
COMPANY LETTER	B
COMPANY LETTER	C
COMPANY LETTER	D
COMPANY LETTER	E

COVERAGE:
THIS IS TO CERTIFY THAT POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED, NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN. THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS, AND CONDITIONS OF SUCH POLICIES.

CS CF	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM-DD-YY)	POLICY EXPIRATION DATE (MM-DD-YY)	LIABILITY LIMITS IN THOUSANDS	
					EACH OCCURRENCE	AGGREGATE
A	GENERAL LIABILITY <input type="checkbox"/> COMPREHENSIVE FORM <input checked="" type="checkbox"/> PREMISES OPERATIONS <input type="checkbox"/> UNDERWRITING <input type="checkbox"/> EXPLOSION & COLLAPSE HAZARD <input type="checkbox"/> PRODUCT-COMPLETED OPERATIONS <input type="checkbox"/> CONTRACTUAL <input type="checkbox"/> INDEPENDENT CONTRACTORS <input type="checkbox"/> BROAD FORM PROPERTY DAMAGE <input type="checkbox"/> PERSONAL INJURY	AJM-10134	6/30/89	7/6/89	BODILY INJURY	
	PROPERTY DAMAGE					
	BI & PD COMBINED				\$1,000	\$1,000
	PERSONAL INJURY					
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON OWNED AUTOS <input type="checkbox"/> TRAILER LIABILITY				BODILY INJURY (PER PERSON)	
					BODILY INJURY (PER ACCIDENT)	
					PROPERTY DAMAGE	
					BI & PD COMBINED	
	EXCESS LIABILITY <input type="checkbox"/> OVERLEAF FORM <input type="checkbox"/> TRIP/CRUISE/UMBRELLA FORM				BI & PD COMBINED	
	WORKERS' COMPENSATION AND EMPLOYERS' LIABILITY				STATUTORY	
					(EACH ACCIDENT)	
					(DISEASE POLICY LIMIT)	
					(DISEASE-EACH EMPLOYEE)	
	OTHER					

OPERATIONS/LOCATIONS/VEHICLES/SPECIAL ITEMS:
Event: Region II Contest at Minden, NV from 6/30 - 7/6/89. Additional insured: Douglas County Commissioners and Employees, for liability as respects the negligent and insured acts of the named insured.

ENDORSEMENT:
Douglas County
Commissioners and Employees
P.O. Box 218
Minden NV 89423
202116
3X05 - CRD - BOOK 589 PAGE 2075

CANCELLATION:
SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING COMPANY WILL ENDEAVOR TO MAIL _____ DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE COMPANY, ITS AGENTS OR REPRESENTATIVES.
AUTHORIZED REPRESENTATIVE
- Pat Costello *Pat Costello* U

COPY

CERTIFIED COPY

The document to which this certificate is attached is a full, true and correct copy of the original on file and on record in my office.

DATE: May 17, 1989
P. Reed Clerk of the 9th Judicial District Court
of the State of Nevada, in and for the County of Douglas.

By Julie Hoffman Deputy

REQUESTED BY
DOUGLAS COUNTY
IN OFFICIAL RECORDS OF
DOUGLAS CO., NEVADA

'89 MAY 17 AIO :03

SUZANNE BEAUDREAU
RECORDER **202116**

\$ 0 PAID K12 DEPUTY

BOOK **589** PAGE **2076**