

APPLICATION FOR ISSUE OF SPECIAL/FERRY FLIGHT PERMIT

1. Name of the Owner /Operator:

2. Address of the Owner /Operator:

3. Aircraft Details:

Make _____

Model _____

Serial Number _____

Registration Marks _____

4. Purpose of the Flight:

5. Flight Plan:

6. Names of the Flight Crew : _____

Ratings held : _____

Licence validity: _____

7. Detailed assessment of defect/damage sustained:

8. Any limitation/restriction the applicant considers necessary for safe operation of the aircraft:

Engineering : _____

Operation : _____

9. Proposed action to make the aircraft fit for ferry flight:

10. Any other information relevant to the flight for the purpose of prescribing Operating limitations:

Certified that the aircraft is capable of safe flight to the intended destination.

Signature of Chief of Engineering/
QCM

Signature of Chief of Operations

Date:

Place: