[**WWW.AAC.CV**](http://www.aac.cv) **VERSION: DRE-NCFP 01/14**

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| **DEPARTMENT OF**  **ECONOMIC REGULATION**  Agência de Aviação Civil,  Av. Cidade de Lisboa, #34  Praia – Cabo Verde | | | **REPUBLIC OF CABO VERDE**  logo aac  **CIVIL AVIATION AUTHORITY**  **REQUEST FORM FOR NON-COMMERCIAL**  **FLIGHT PERMISSION** | | | | | | Tel : +238 2603430/1/2  Fax : +238 2611075  E-mail:  [joses@acivil.gov.cv](mailto:joses@acivil.gov.cv)  [emanuels@acivil.gov.cv](mailto:emanuels@acivil.gov.cv)  [octavio.oliveira@acivil.gov.cv](mailto:octavio.oliveira@acivil.gov.cv)  [dgeral@acivil.gov.cv](mailto:dgeral@acivil.gov.cv) | | |
| **THIS FORM SHALL BE SUBMITTED 72 HOURS BEFORE THE DATE OF OPERATION** | | | | | | | | | | | |
| **REQUESTING OPERATOR/ENTITY** | | | | | | | | | | | |
| **Your ref.**  **Date:** add a date  **Contact for permit:** | | | | | | **Request for** : Mark (X ) as appropriate | | | Overfly  Landing | | |
| 1 | Operator/Entity | | | | |  | | | | | |
| 2 | Operator Code (ICAO/IATA) | | | | |  | | | | | |
| 3 | Address | | | | |  | | | | | |
| 4 | Phone/Fax | | | | |  | | | | | |
| 5 | e-mail | | | | |  | | | | | |
| 6 | Purpose of Operation | | | | |  | | | | | |
| 7 | Aircraft (Manufacturer/Type/Series) | | | | |  | | | | | |
| 8 | Aircraft Registration Marks | | | | |  | | | | | |
| 9 | Crew Information | | | | |  | | | | | |
| 10 | Representative/Handler (if applicable) | | | | |  | | | | | |
| **PROPOSED OPERATION** [mark (X) as appropriate] | | | | | | | | | | | |
| 11 - Technical Landing  12 - Private/Business  13 - Passenger  14 - Cargo (see 26/Note1)  15 - Aerial work/scientific  16 - General Aviation  17 - Government  18 - Ambulance  19 - Dangerous Good/Military (see 27/Note 2)  20 - Other (specify) | | | | | | | | | | | |
| 21 | Date of Flight  (DD/MM/YYYY) | Flight No | | | Airport of Origin  (ICAO/IATA code) | | ETD  UTC | Airport of Destination  (ICAO/IATA code) | | ETA  UTC | Notes |
| 22 | date |  | | |  | |  |  | |  |  |
| 23 | date |  | | |  | |  |  | |  |  |
| 24 | date |  | | |  | |  |  | |  |  |
| 25 | date |  | | |  | |  |  | |  |  |
| **ADDITIONAL DETAILS** | | | | | | | | | | | |
| 26 | Description/destination and consignee of Cargo | | |  | | | | | | | |
| 27 | Description and consignee of Dangerous Goods/Military Cargo | | |  | | | | | | | |
| 28 | Passengers Information | | |  | | | | | | | |
| **NOTE 1:** *Flights carrying Cargo To/From Cabo Verde must attach copy of valid: carrier license, AOC, insurance and airworthiness certificates.*  **NOTE 2:** *Flights carrying Dangerous Goods/Military Cargo must attach copy of valid: carrier license, AOC, insurance and airworthiness certificates; and proper authorizations/documents to transport such goods and cargo.*  **Note 3:** *For all flights: further information/document may be requested.* | | | | | | | | | | | |

**…………………………………………………………….For AAC internal use…………………………………………………………**

**Permit No**…………./AAC/………… (Signature of authorized person)

**Date: / /**  Name / Designation