

# APPLICATION FOR AN EXEMPTION FORM: AED-F-010

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| REPUBLICA DE CABO VERDEAAC LogoCivil Aviation Authority | APPLICATION FOR an Exemption  |

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| 1. **PARTICULARS REGARDING THE APPLICANT**
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| * 1. Full name (Co. Representative):
	2. Company (if applicable):
	3. Full business/residential address:
	4. Name of person who can be contacted for further information concerning this application:
	5. Postal address:       Telephone number:       Fax number:
	6. Agent for service (if different from the applicant)
	7. Postal address:       Telephone number:       Fax number:
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| 1. **APPLICATION DETAILS**
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| * 1. The specific sections of CV-CAR. from which an exemption is sought:

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| * 1. The category under which exemption sought (TEMPORARY/ PERMANENT)

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| * 1. Description of the type of operations to be conducted under the proposed exemption;

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| * 1. The proposed duration of the exemption:

Start Date       End Date        |
| * 1. An explanation of how the exemption would be in the public interest, that is, benefit the public as a whole;

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| * 1. A detailed description of the alternative means to ensure a level of safety equivalent to that established by the Regulation in question;

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| * 1. A summary to be published in AAC web-site stating the rule from which an exemption is sought and a brief description of the nature of the exemption sought:

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| * 1. A review and discussion of any known safety concerns with the requirement, including information about any relevant accidents or incidents of which the applicant is aware;

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| * 1. Whether and why the privileges of this exemption are needed to be exercised outside of Cabo Verde or may impact international operations (if applicable):

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| * 1. If the applicant has urgency, indicate the facts and reasons that explain why the application was not timely submitted, and the reasons why this is an emergency.

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| 1. **APPLICANT DECLARATION**
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| I hereby declare that the particulars entered on this application and the attached AAC is accurate in every respect. |
| Print Name | Signature | Date |

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| 1. **AAC USE ONLY : RECOMMENDATION TO ISSUE/DENY AN EXEMPTION**
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| The above referenced exemption and its documents have been evaluated in accordance with the Civil Aviation Regulations currently in force. It is recommended that the exemption be [ ]  **ISSUED from**      /     /       **to**      /     /      with the following limitation and condition………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………[ ]  **DENIED**  |
| for the following reasons:……………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………… |
| AAC Inspector name | Signature | Date |

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| **AAC President** |
| I hereby Approve the [ ]  Issue of the Exemption from      /     /      to      /     /      with the following limitation and condition………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………[ ]  Denialfor the following reasons:……………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………… |
| AAC President name  | Signature | Date |