

SPECIAL FLIGHT PERMIT (SFP) APPLICATION FORM

A. DETAILS OF AIRCRAFT:

1. Operator: _____
2. Address: _____
3. City: _____ 4. Country: _____
5. Registration Mark: P4- _____ 6. Aircraft Manufacturer: _____
7. Model: _____ 8. Serial No.: _____

B. DESCRIPTION OF FLIGHT: (PROVIDE NAME AND ICAO CODE OF AIRPORTS)

1. Type of flight: ☐ Ferry flight ☐ Test flight (Nr. Of flights:____) ☐ Ferry and Test flight
2. From: _____ 3. To: _____
4. Via: _____
5. Departure date: _____ 6. Estimated duration: _____
7. Flight into RVSM airspace: ☐ Yes ☐ No

C. CREW REQUIRED TO OPERATE THE AIRCRAFT AND ITS EQUIPMENT:

1. Number of persons on board: _____

| | Name | License/validation Nr. | Function: |
|---|------|------------------------|-----------|
| 1 | | | |
| 2 | | | |
| 3 | | | |
| 4 | | | |
| 5 | | | |

D. THE REASON FOR THE SPECIAL FLIGHT PERMIT APPLICATION:

E. THE AIRCRAFT DOES NOT MEET THE FOLLOWING APPLICABLE AIRWORTHINESS REQUIREMENTS:

F. THE FOLLOWING RESTRICTIONS ARE CONSIDERED NECESSARY FOR SAFE OPERATION:

G. DECLARATION:

Hereby declare that all statements provided in this application are true and correct in every respect and that I shall adhere to all applicable Aruban regulations.

Date (day/month/year): _____ Position: _____

Name: _____ Signature: _____