




Ministry of Transport and Communications  Department of Civil Aviation ARUBA	For DCA - ARUBA use only (Check all applicable blocks below) Inspection for a special flight permit was conducted by: <input type="checkbox"/> DCA-Aruba Inspection <input type="checkbox"/> DCA-Aruba approved / accepted AMO <input type="checkbox"/> DCA-Aruba licenced maintenance technician
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SPECIAL FLIGHT PERMIT APPLICATION

A	DESCRIPTION OF AIRCRAFT		
	Operator:		Address:
	Manufacturer:		Model:
	Serial number:		Registration marks:
B	DESCRIPTION OF FLIGHT (PROVIDE NAME AND ICAO CODE OF AIRPORTS)		
	Type of flight: <input type="checkbox"/> Ferry flight <input type="checkbox"/> Test flight (Number of flights:) <input type="checkbox"/> Ferry and test flight		
	From:		To:
	Via:		Departure date: Duration:
C	CREW REQUIRED TO OPERATE THE AIRCRAFT AND ITS EQUIPMENT		
	Number of persons on board:		
	Name:	Licence no.	Function:
	Name:	Licence no.	Function:
	Name:	Licence no.	Function:
	Name:	Licence no.	Function:
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	Certification- I hereby certify that I am the registered operator/owner/holder of the aircraft described above; that the aircraft has been inspected by an appropriately Aruban licenced maintenance technician or maintenance organization and found airworthy for the flight(s) intended.		
Date:	Name and title:	Signature:	