



Application for Special Flight Permit

INS-4.034

Ministry of Transport and Communications



Department of Civil Aviation
ARUBA

For DCA - ARUBA use only

(Check all applicable blocks in item A and B)

- A I find that the aircraft meets requirements for:
- Certificate requested
 - Amendment or modification of current airworthiness certificate
- B Inspection for a special flight permit was conducted by:
- DCA-Aruba Inspection
 - DCA-Aruba approved / accepted AMO

SPECIAL FLIGHT PERMIT PURPOSES

A	DESCRIPTION OF AIRCRAFT	
	Registered owner / holder:	Address:
	Manufacturer:	Model:
	Serial number:	Registration marks:
B	DESCRIPTION OF FLIGHT (PROVIDE ICAO CODE OF AIRPORTS)	
	From:	To:
	Via:	Departure date:
		Duration:
C	CREW REQUIRED TO OPERATE THE AIRCRAFT AND ITS EQUIPMENT	
	<input type="checkbox"/> Pilot <input type="checkbox"/> Co-pilot <input type="checkbox"/> Navigator <input type="checkbox"/> Other (specify below)	
	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 AIR WORTHINESS REQUIREMENTS:	
F	THE FOLLOWING RESTRICTIONS ARE CONSIDERED NECESSARY FOR SAFE OPERATION:	
G	Certification- I hereby certify that I am the registered owner/holder of the aircraft described above; That the aircraft is registered with the Department of Civil Aviation of Aruba in accordance with the Air Navigation Decree of Aruba, and applicable registrations; and Has been inspected and is airworthy for the flight described.	
	Date:	Name and title: Signature:

