

# CERTIFICATION APPLICATION (EXTERNAL CLEARANCE/APPROVAL) FORM AED-F-006

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| **1. REQUIRED DOCUMENTATION** |
| *Note: Before submitting this application, the relevant authorities as indicated in BLOCK 1, should be consulted and if appropriate, their approvals obtained. There may also be other bodies that applicants should inform in their own interests; it is the responsibility of the applicant to obtain the appropriate approvals.*  |
| a) Have the following being attached : |
| b) Environmental Impact Assessment Approval? | Yes :  | No : |
| c) Government Security Clearance? | Yes :  | No : |
| d) Details of right held in relation to the site; and  |  |  |
| e) Name and address of the owner of the site and written evidence that permission has been obtained for the site to be used by the applicant as an aerodrome | Yes :  | No : |
| f) Survey Plan of the Area  | Yes :  | No : |
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|  **2. COMMENTS**  |
| a) Have any of the relevant authorities in Block 1 above raised any objections to the proposed use of the site as an aerodrome or the proponent’s status as an aerodrome operator: | Yes :  | No : |
| b) If yes, please State the Authority concerned and the nature of the objection:  |
|  **3. DECLARATION**  |
| I hereby certify that the foregoing information is correct in every respect and no relevant information has been withheld. I undertake to pay the (State) AAC Service Fee in respect of this application and agree to abide by the terms and conditions of holding an Aerodrome Certificate as outlined in national civil aviation regulation.*Note: It is an offence to make any false representation with intent to deceive, for the purpose of procuring the grant, issue, renewal or variation of an Aerodrome Certificate. A person found guilty of such an offence is liable to a fine on summary conviction and to a fine, imprisonment or both on conviction on indictment.***Name:** **Title:** **Signature:****Date:** |
| If you have any difficulty completing this application form, then please do not hesitate to contact the AAC. Send with this application form and the required supporting documentation to the AAC by one of the following: |
| Post: | Courier | E-mail |
| (State) CAA: Attn: Name,Title AddressCity, Country | BuildingAddressAttn: Name, Title City, Country Phone: xxx | dgeral@acivil.gov.cv |