Arrow

Description automatically generated with low confidence

***Application for issue of Special Flight Permit***

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| **Instructions and advice for completing this application form**   1. The CAA standard rate hourly charge applies. Follow the link for information on [fees and charges](https://www.aviation.govt.nz/about-us/what-we-do/how-we-are-funded/fees-levies-and-charges/) 2. Refer to Advisory Circular [AC 21-9](https://www.aviation.govt.nz/rules/rule-part/show/21) before completing this application. |
| 1. Entries should be typed or printed in block letters. Full model designation is required (refer to the manufacturer’s data plate). |
| 1. Applicants should clearly understand that unless all entries on this form are completed accurately and fully, the issue of a Special Flight Permit may be delayed. |
| 1. The charges associated with the issue of a Special Flight Permit will be invoiced to the registered owner of the aircraft described in Section B, unless requested in writing. |
| 1. ***Submit the completed application to either:***   ***Email:***[*certification@caa.govt.nz*](mailto:certification@caa.govt.nz)  ***Post:*** *Certification Unit, Civil Aviation Authority, PO Box 3555, Wellington 6140* |

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| ***Section A: Applicant*** | | | | | | | |
| Applicant: | | |  | | | CAA participant number: |  |
| Please identify the formal applicant as the registered owner (or the agent of the registered owner), or the organisation that will be invoiced for this application. | | | | | | | |
| Address for serviceCivil Aviation Act, s8, requires applicants to provide an address for service in New Zealand (ie, a physical address) and to promptly notify the Director of any changes. | | | | |  | | |
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| Tel: |  | | | Email: |  | | |
| Postal address  (If different from address for service) | | | | |  | | |
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| Tel: |  | | | Email: |  | | |
| ***Name person who can be contacted for further information concerning this application:*** | | | | | | | |
| Name: | | | | |  | | |
| Designated position: | | | | |  | | |
| Address: | | | | |  | | |
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| Tel: | |  | | Email: |  | | |

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| ***Section B: Aircraft Description*** | |
| Manufacturer: |  |
| Model designation: |  |
| Constructor’s serial number: |  |
| Registration mark: ZK- |  |

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| ***Section C: Purpose of Flight*** | | |
| Ferry Flight | Aircraft evacuation | Flight testing of new aircraft by Part 148 Aircraft Manufacturing Organisation |

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| ***Section D: Proposed Itinerary*** |
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| ***Section E: Proposed Crew Member(s)*** |
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| ***Section F: Non-Compliance with any Applicable Airworthiness or Maintenance Requirements*** | | |
| **State reason(s) why Special Flight Permit is required:**  **NOTE:** List the exact airworthiness or maintenance requirements, or New Zealand Civil Aviation Rules that the aircraft does not comply with. Where maintenance is overdue, include in the list all applicable inspections and airworthiness directives that are overdue. Attach separate page(s) as necessary. | | |
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|  | Number of separate pages attached: |  |

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| ***Section G: Proposed Operating Restrictions*** |
| *List any restrictions that may be necessary for the safe operation of the aircraft:* |
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| ***Section H: Inspection*** | | | |
| *Pre-flight inspection and fitness for flight certification will be performed by the following person:* | | | |
| Name: |  | AME licence no: |  |

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| ***Section I: Declaration*** | | |
| I hereby declare that I am the registered owner or agent\* and to the best of my knowledge and belief the particulars entered on this application are accurate in every respect and show compliance with Civil Aviation Rule Part 21 Subpart H. | | |
| Full name |  | Owner  Agent  \* |
| Signature |  | Date |
| *\*Select as required* | | |