

Application for Approval or Exemption to Carry Dangerous Goods under Special Circumstances

Note - This form applies to requests to carry dangerous goods where they do not comply with the normal requirements of the ICAO Technical Instructions. Application shall be made **at least 10 working days** before the date of the flight on which the dangerous goods are to be carried.

Instructions:

1. Please read Aeronautical Circular - AC/OPS/005 before completing this form.
2. Applicant shall be the air operator who offers to transport the dangerous goods hereunder.
3. Copies of approval / exemption issued by the State(s) concerned as notified in the ICAO Technical Instructions shall be enclosed with this application.
4. In case the items outlined in section (1) involve various shipper(s) and consignee(s), please provide relevant information as section (3) and (4) on separate sheet for each specific item accordingly.
5. The form once completed should be returned by post / fax / e-mail to the Civil Aviation Authority – Macao, China:
Address: 18/F, Cheng Feng Commercial Centre, 336-342, Alameda Dr. Carlos D'Assumpção, Macao
Fax: (853) 2833 8089
Email: flightstandards@aacm.gov.mo
6. Failure to complete this form in full may result in a delay in processing the application.

1. Consignment details:

Operator:		Period of intended carriage in MACAO:						
		From (dd/mm/yyyy):			To (dd/mm/yyyy):			
Flight number:	Aircraft Model:		Type of aircraft: <input type="checkbox"/> Passenger <input type="checkbox"/> Freighter					
Airport of departure:	Departure date (dd/mm/yyyy):		Airport of destination:			Arrival date (dd/mm/yyyy):		
ICAO code:			ICAO code:					
Transit point(s) (if any):								
Item	UN number	Proper shipping name	Class/Division & Compatibility group	Packing instruction	Number of package	Type of package	Net quantity (total)	Gross weight (total)
1.								
2.								
3.								
4.								

(Please continue on additional pages, if necessary)

2. The reason why it is essential the article(s) or substance(s) must be carried by air:

.....

.....

.....

.....

.....

.....

3. Shipper details:

Name (BLOCK LETTERS): Telephone:
.....
Organization: Fax:
.....
..... E-mail:

Shipper of item(s):

4. Consignee details:

Name (BLOCK LETTERS): Telephone:
.....
Organization: Fax:
.....
..... E-mail:

Consignee of item(s):

5. Additional information (if any):

.....
.....
.....
.....
.....

6. Declaration:

Applicant shall ensure that following documents are submitted with this application

- Copies of dangerous goods approval / exemption issued by State(s) concerned for the proposed shipment are enclosed.
- Others (Please specify) :
.....

The undersigned declares that the information given in this application package is true in every respect.

Name (BLOCK LETTERS): Company Title & Department:
.....
.....
Telephone:
Fax: E-mail:

Signature : Date :