



**PAKISTAN CIVIL AVIATION AUTHORITY
AIR TRANSPORT & ECONOMIC
REGULATIONS
REQUEST FOR NON-SCHEDULE
FLIGHTS PERMISSION IN PAKISTAN**

CAAF-012-ATNR-1.0

Request for : (✓) Tick at appropriate box) Overflying Landing

General Manager Air Transport (National Regulations)
Headquarters, Pakistan Civil Aviation Authority,
Terminal-1 JIAP, Karachi.
Phone: 92-21 -9924-2033
Fax: 92-21 -9924-2032
AFTN: OPHQZXAT

S.NO.	CALL SIGN	ACFT TYPE & REG NO.	DATE OF OPS.	PLACE OF DEP & TIME (UTC)	ENTRY POINT & TIME (UTC)	ARR DEP TIME (UTC)	EXIT POINT & TIME (UTC)	ARR DEST & TIME (UTC)
1	2	3	4	5	6	7	8	9

10	Aircraft ownership (Military / Civil)	
11	Aircraft / Helicopter	
12	Flight Level (approximate)	
13	Maximum Take Off Weight (MTOW)	
14	Purpose of Flight (Pax/Cargo/Ferry/VIP/Tech Landing)	
15	Purpose of Visit of Pax/Contact	
16	Particulars/Nationality/ of Transit Pax	
17	Specific Details of Cargo	
18	Address of the Consignor	
19	Address of the Consignee	
20	State of Registration of Aircraft	
21	Name and Address of Airline / Operator (IATA/Non-IATA Member)	
22	Capt. Name, Nationality/details of Crew with Nationality (use separate sheet if required)	
23	Ground Handling Agent	
24	Bill to be made to	

UNDERTAKING: This aircraft is not carrying any ammunition of war, military cargo, aerial photography, electronic surveillance and / or reconnaissance apparatus, or any contraband stuff, dangerous materials, chemicals, liquor, etc. including other forbidden articles which would likely to endanger the safety of persons on board (such as the passengers, Flight crew & cabin crew members) or cause any damage to the aircraft.

NOTE 1: For flights carrying Pax/Cargo To/From Pakistan are required to submit copy of valid AOC along-with confirmation of comprehensive insurance coverage (Hull, Pax, Crew & Third Party) as per ICAO Montréal Convention 1999.

NOTE 2: Non-IATA carriers will be required to furnish complete details of the load to be carried on the charter flight together with a copy of the charter agreement along with application.

Dated: _____

(Signature of authorized person)
Applicant Name / Designation
PCAA Registration No. _____