

APPLICATION FOR CARRIAGE WEAPONS OF WAR AND MUNITIONS OF WAR (CAT.GEN.MPA.155)

Applicants are required to complete this application form when apply for approval to carry weapons of war and munitions of war in accordance with provision CAT.GEN.MPA.155

Application should be made at least seven (7) days before the date of shipment and submitted by post or e-mail to the:

CROATIAN CIVIL AVIATION AGENCY

Flight Operations and Training Department

HR-10000 ZAGREB, Ulica grada Vukovara 284

E-mail: ccaa@ccaa.hr

Failure to complete this form in full may result in a delay of processing the application.

The issuing of this form does not itself constitute an authorization to carry weapons of war.

1. TYPE OF APPLICATION

- 1.1 For single occasion (Ad Hoc Approval)
- 1.2 For period not exceeding six (6) months (Block Approval)

2. APPLICANT

2.1 Full name of the legal er	ntity		
2.2 Address			
2.3 Authorised person's nan	ne and surname		
2.4 Contact information			
2.4.1 Phone	2.4.2 Mobile phone	2.4.3 Fax	
2.4.4 E-mail	•		

3. OPERATOR (if not Applicant under 2.)

3.1 Full name of the operator			
3.2 Address			
3.3 Name and surname of the autho	rised person responsible for the trans	sport of weapons of war with the operator	
3.4 Contact information			
3.4.1 Phone	3.4.2 Mobile phone	3.4.3 Fax	
3.4.4 E-mail			
4. DETAILS OF CONSIGNMENT	Т		
4.1 Operator(s) involved			
4.2 Flight(s) No.			
4.3 Routing of consignment			
Import	Export	Transhipment	
4.4 Airport of departure	4.5 Airport of transit 4.6 Airport of destination		
4.7 Date of intended carriage for Ad	Hoc Approval		
4.8 Period of intended carriage (for E	 Block Approval, if applicable) from - to		
	-		
4.9 Aircraft type			
Passenger	Cargo	Combi	

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4.10 Name and address of shipper						
4.11 Name and address of consignee						
4.12. WEAPONS OF WAR NOT CLASSIFIED AS E	DANGEROUS GO	ODS				
Make of weapons and type (rifle, pistol, etc.)			Calibre		Quantity	
4.13. MUNITION OF WAR CLASSIFIED AS DANG	EROUS GOODS	1				
Proper Shipping Name	UN No.	Class/ Division	NEQ in kg (Class 1 only)	Qua (othe	Net antity er than ass 1)	Exemption issued by the State of Origin*

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^{*} A copy of the Exemption issued by the State of Origin **MUST** accompany the application, without exception

5. REQUIRED DOKUMENTATION

Signature

Attached	are copies of next documentation
A	ir Waybill
(hipping / Commercial Invoice
E	xport License
I	mport License
E	nd-User Certificate issued by the consignee
(confirmation of representation (if the person shown in Section 2 is not the operator of the aircraft then confirmation in writing must be provided with this application that the operator agrees for that person to act on neir behalf)
A	pproval issued by the State of Origin
E	xemption for MUW classified as DG (if applicable) issued by the State of Origin
Another s	upported documentation (for Block Approval, if applicable)
A	ir Operator Certificate (AOC)
(perations Specifications
F	elevant pages of the Operations Manual (policy and procedures for carriage of weapons of war)
I hereby de	ECLARATION BY APPLICANT clare that the information provided in this application and the accompanying documents are true and correct to
tne best of	my knowledge.
Name	Position

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Date