



Civil Aviation Department (Barbados)

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DEPARTMENT ONLY

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Date: _____ / _____ / _____
Receipt No: _____
Cheque/PO. – \$ _____ ¢ _____
Signature and Stamp

SPECIAL FLIGHT PERMIT – APPLICATION FOR ISSUE

(Complete in block capitals, using black or dark blue ink)

(a) **AIRCRAFT Registration:** _____

Aircraft Type: _____ **Serial No:** _____

Aircraft Location: _____

(b) **ADDRESS** Name and work address of the Licensed Aircraft Maintenance Technician(s), Approved Maintenance Organisation, or BCAD Authorised Person that will be responsible for the issue of the Flight Release Certificate associated with this Special Flight Permit.

Name (s):

Address:

(c) **PURPOSE OF FLIGHT** Qualify for the Issue/Renewal/Re-Validation of an airworthiness certificate. Functional/operational checks of previously approved modifications. Proceed to or from a place for maintenance/test/weighing/painting to be performed. Proceed to or from a place of storage. Flight testing for showing compliance with applicable certification and environmental protection requirements. Other. (Specify below or on separate attached report.)

(d) **DESCRIPTION OF FLIGHT(s)**

From _____ **To** _____

Via _____ ***Date of Intended Flight** _____

(If a series of flights are to be carried out under an approved 'Flight Test Programme', specify on separate attached report)
*Issue date of Permit

(e) CREW COMPOSITION Specify number(s) of crew to be carried whilst operating on the Special Flight Permit.

Pilot(s): _____

Flight Engineer(s): _____

Flight Observer(s): _____

Other (Please specify): _____

NOTE: Only minimum crew shall be carried on an aircraft operating on a Special Flight Permit.

(f) COMPLIANCE WITH MAINTENANCE & AIRWORTHINESS REQUIREMENTS: The aircraft complies with all applicable type certification, maintenance and airworthiness requirements:

YES NO

If the answer is 'No' complete section (g) *(Delete as appropriate)

(g) NON-COMPLIANCE WITH TYPE CERTIFICATION, MAINTENANCE & AIRWORTHINESS REQUIREMENTS

The aircraft is not in compliance with the following type certification, maintenance and/or airworthiness requirements specified below:

NOTE: Any non-compliance with the Maintenance Programme, Airworthiness Directives, Airworthiness Life Limitations or non-compliance with the Type Certification Standard must be declared, including details of any damage. Non-compliance with type certification, airworthiness of maintenance requirements may require technical (engineering) support from the type certificate holder.

(h) MAINTENANCE AND AIRWORTHINESS INSPECTIONS Specify any particular maintenance inspections that will be accomplished in order to establish the airworthiness standard for the intended flight(s) on the Permit to Fly. *(Attach additional report if required.)*

(i) DECLARATION I hereby confirm that with respect to this application I am acting on behalf of the registered Owner/Operator of the aircraft. As an appropriately type rated *Licensed Aircraft Engineer/*AMO Authorised Person/*BCAD Authorised-Approved Person*, I will ensure that prior to any flight a valid Flight Release Certificate is in force, issued in accordance with Airworthiness Advisory Circular #15 and that the aircraft will be in an appropriate airworthy condition to perform the intended flight(s).

Name: _____ **Signature:** _____ **LicenceAuthorisation No:** _____

Date: _____ **Organisation Name:** _____

Organisation Approval: _____ *Delete as appropriate

BCAD USE ONLY

Permit to Fly No: _____

Date of Issue: _____

A/W Inspector Name: _____ **Aircraft/Records Survey performed** Yes/No