

# Flight Declaration

Declaration of a non-commercial flight with a complex motor-powered aircraft  
exempted from the application of Commission Regulation (EU) No 965/2012

Please fill in the framed fields of the form, sign it and send it together with attachments to ops@austrocontrol.at, or via FAX to +43 5 1703 1686, or by post to:

AUSTRO CONTROL GmbH, Aviation Agency, Schnirchgasse 17, 1030 Vienna, Austria

## 1 Operator

Company name, or name of the person

Street Place Postal Country

Telephone Fax E-Mail

## 2 CAMO

Name and address of the organisation and approval reference (as per EASA Form 14)

## 3 Flight

Date of Flight Route Purpose

## 4 Aircraft

Registration Type MSN

## 5 Operational Requirements (Please fill in checklist)

- AFM or equivalent documents in current revision including: FCOM, QRH, checklists.\*
- Where required: ACG or EASA flight conditions complied with.
- Certificate of Airworthiness (original) or Permit to Fly.\*
- Airworthiness Review Certificate (ARC) (original) (only if already issued).\*
- Certificate of Registration (original).\*
- Noise Certificate (only if already issued).\*
- Radio Station Licence or interim licence.\*
- Third party liability insurance certificate(s).\*
- Operational Flight Plan (including NOTAM, weather report, weight and balance calculation, AIS etc.).\*
- Current and suitable aeronautical charts for the route of the proposed flight and alternates.
- Specific Approvals e.g. RVSM Approval (if applicable). \*
- Demo flight profile (if applicable).\*
- Journey log, or equivalent, for the aircraft.\*
- Any other documentation that may be pertinent to the flight or is required by the states concerned with the flight.
- Authorisation of the owner of the aircraft (if applicable).
- All persons on board are familiar and briefed with the applicable flight operations procedures and the nature of the flight.

\* on board of the aircraft

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## 6 Pilot Requirements (Please fill in checklist and attach appropriate copies)

Name of Pilot	Name of Pilot	Name of Pilot
<input type="checkbox"/> Flight Crew Licence	<input type="checkbox"/> Flight Crew Licence	<input type="checkbox"/> Flight Crew Licence
<input type="checkbox"/> Passport	<input type="checkbox"/> Passport	<input type="checkbox"/> Passport
<input type="checkbox"/> Medical Certificate	<input type="checkbox"/> Medical Certificate	<input type="checkbox"/> Medical Certificate

## 7 Name and contact details of Aircraft Flight Operations Control and Supervision in place (Flight Watch)

Name	
<input type="text"/>	
Telephone (24 hr)	E-Mail
<input type="text"/>	<input type="text"/>

## 8 Additional comments

<input type="text"/>
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## 9 Statement

The PIC herewith confirms that

- the information disclosed in this form is correct,
- the flight crew has been briefed as stated in item 5 and
- the conditions of ACG LTH 71A have been complied with.

## 10 Signature

Place	Date	Printed Name	Signature of Pilot in Command
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>