

Application form for overflying Oman airspace

New Request:		0	Amei	ndment:	0	DAT/	
1	* Operator Name:						
2	* Operator's Full Address:						
3	* Schedule:						
4	*A/C type & MTOW (KGs):						
5	* Aircraft Registration:						
6	*Call Sign/Flight Number:						
7	* Purpose of Flight:						
8	Settling Air Handling, Pass	nthority & Conta Navigation, G enger Tax, Land es and Other Cha	round ing &	Billing A	ddress:		E-mail Address:
9		mber of Crew an		Pax.:			Crew:
Passengers (Name/OccupationEtc.). For Charter Flights & Cargo Flights							
				g			
10	Consignor/cons	ignee:					
11	Nature of Cargo (if applicable):						
Form Rules Request 1. Applications are accepted electronically only by filling out this form and sending it by pressing the Send button. 2. Please fill in the basic data (≯to ensure acceptance of the application. 3. Attachments are sent to the email address shown: permits-om@paca.gov.om 4. The application will not be considered if the above conditions are not met. For more information, please contact: 24354028 / 62 / 27 / 43-Air Transport Department.							