

Note: The CAA Standard Rate hourly charge applies. See [fees and charges](#).

**Instructions and advice for completing this Application Form**

1. Refer to Advisory Circular AC 21-3 before completing this application.
2. Entries should be typed or printed in block letters. Full model designation is required (refer to the manufacturer’s data plate).
3. Applicants should clearly understand that unless all entries on this form are completed accurately and fully, the issue of a Special Flight Permit may be delayed.
4. The charges associated with the issue of a Special Flight Permit will be invoiced to the registered owner of the aircraft described in Section B, unless requested in writing.
5. **Submit the completed application to either:**  
**Email:** [certification@caa.govt.nz](mailto:certification@caa.govt.nz)  
**Post:** Certification Unit, Civil Aviation Authority, PO Box 3555, Wellington 6140

**Section A: Applicant**

Applicant:					
Please identify the formal applicant as the registered owner (or the agent of the registered owner), or the organisation that will be <i>invoiced</i> for this application.					Client ID No. (if known)
Address for Service: <i>Civil Aviation Act, s8, requires applicants to provide an address for service in New Zealand (ie, a physical address) and to promptly notify the Director of any changes.</i>					
Tel		Email			
Postal Address: <i>(If different from Address for Service.)</i>					
Tel		Email			
Name of organisation or person who can be contacted for further information concerning this application:					
Name:					
Designated Position:					
Address:					
Tel		Email			

**Section B: Aircraft Description**

a.	Manufacturer:	
b.	Model Designation:	
c.	Constructor’s Serial Number:	
c.	Registration Marks:	Z K -

**Section C: Purpose of the Flight**

Ferry flight	<input type="checkbox"/>
Aircraft evacuation	<input type="checkbox"/>
Flight testing of new aircraft by Part 148 Aircraft Manufacturing Organisation	<input type="checkbox"/>

(Tick as required)

**Section D: Proposed Itinerary**


**Section E: Proposed Crew Member(s)**


**Section F: Non-Compliance with any Applicable Airworthiness or Maintenance Requirements**

State reason(s) why Special Flight Permit is required:

**NOTE:** List the exact airworthiness or maintenance requirements, or New Zealand Civil Aviation Rules that the aircraft does not comply with. Where maintenance is overdue, include in the list all applicable inspections and airworthiness directives that are overdue. Attach separate page(s) as necessary.

	Number of separate pages attached: <input type="text"/>

**Section G: Proposed Operating Restrictions**

List any restrictions that may be necessary for the safe operation of the aircraft:


**Section H: Inspection**

Pre-flight inspection and fitness for flight certification will be performed by the following person:

Name	<input type="text"/>	AME Licence No:	<input type="text"/>
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**Section I: Declaration**

I hereby declare that I am the registered \* owner  or agent  and to the best of my knowledge and belief the particulars entered on this application are accurate in every respect and show compliance with Civil Aviation Rule Part 21 Subpart H.

Full name	<input type="text"/>	Owner <input type="checkbox"/> Agent <input type="checkbox"/> *
Signature	<input type="text"/>	Date: <input type="text"/>

\*Select as required