

**APPLICATION FOR INTERNATIONAL NON-SCHEDULED AIR TRANSPORT PERMIT (Landing/Overflight)**

**A. APPLICANT/COMPANY CONTACT DETAILS**

Full Name:

Full Address:

Tel:  Fax:

Email:

**A. PERMIT**

**DETAILS**

Type of Aircraft :  Registration :

MAUW:  Name of Pilot:

Number of Pax:  Period of Journey: From  to

Route:

**For Landing Flights:**

Purpose of Journey :

Date of Arrival:  Date of Departure:

**FOR OFFICIAL USE ONLY**

Permit Number:  Date of Issue:

Authorised by: Name  Signature

Special Conditions:

**NB: Please be Advised that:**

i) Applicants are required to provide all the information requested in this form. Failure to do so will result in the application being declined.

ii) Fees for landing are payable on arrival at the destination airport

iii) Fees for aircrafts overflying Botswana airspace will be billed directly to the operator/applicant

iv) Hours of Operation: Weekdays: 8am – 5pm, Fax to +2673953517/3913121. After 5pm and Weekends, Fax to: 3904557/9