

Department of Civil Aviation  
SSR International Airport  
Plaine Magnien  
MAURITIUS



Tel: (230) 6032000  
Fax: (230) 6373164  
Email: civil-aviation@govmu.org

## APPLICATION TO CARRY CLASS 1 DANGEROUS GOODS

### (WEAPONS AND MUNITIONS OF WAR, AND /OR SPORTING WEAPONS)

Note: (1) This form applies to all requests to carry Class 1 (weapons and munitions of war, and /or sporting weapons) dangerous goods. If there is insufficient space to list all items, they can be listed on separate sheet.

(2) Application for permission should be made at least 05 working days before the date of the flight on which the class 1 dangerous goods are to be carried.

(3) The applicant should pay the applicable processing fees as per the Civil Aviation Regulations at the time of application.

(4) This application will not be processed until the applicable charges have been received.

### 1. APPLICANT DETAILS

Name:	
Company:	
Address:	
Telephone:	
Fax:	
Email:	

### 2. FLIGHT DETAILS

Operator:	
Date of Flight:	
Flight No:	
Airport of departure:	
Airport of destination:	
Other Airport (Technical stops):	
AWB No(s): <i>(in case of more than two Awb Numbers, please list all in the row)</i>	
Shipper:	Consignee:

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### 3. MUNITIONS OF WAR

Quantity	Calibre	Make of weapons/munitions and type (rifles, pistols, etc)

### 4. DETAILS OF DANGEROUS GOODS

UN or ID No.	Proper Shipping Name	Class or Division (Subsidiary hazard)	Quantity in Kg	Type of packing and packing Instructions	Country of Origin

Specific loading point at departure airport:

Specific unloading point at destination airport:

Commercial Names of Items and Quantity:  
(As per commercial documents (provided to Airline))

Please use additional sheet if necessary.

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## I DECLARE

(I) that I have understood and fully comply with the provisions of Annex 18 to the Convention on International Civil Aviation, the current edition of the International Civil Aviation Organisation (ICAO) Technical Instructions for The Safe Transport of Dangerous Goods by Air;

(II) that the dangerous goods to be carried on board the aircraft are not forbidden by ICAO for transport by air; and,

(III) that the airline/company will pay the applicable processing fees as per the Civil Aviation Regulations.

On Behalf of Applicant:

Name:

Organisation:

Signature:

Date:

<b>For DCA use only</b>		
Date of review of the application and supporting documents for evaluation of eligibility		
Status of application	<input type="checkbox"/> Approved	<input type="checkbox"/> Rejected
Reference of approval issued		
Name of DCA Officer		
Signature		