SOUTH AFRICAN	

CIVILAVIATION	Section/division: Telephone number: Physical address: Postal address:	DANGEROUS GOODS 011-545-1000 Ikhaya Lokundiza, 16 Treı Private Bag X73, Halfway		Form Number: CA 92-08 011-545-1465 Bekker Street, Midrand, Gauteng Website: www.caa.co.za
AUTHORITY				
	DETA	AILS OF BANK ACCOUNT F	OR PAYMENT OF PRESCI	RIBED FEE
Bank: Standard Bank	of SA Ltd Bra	anch: Brooklyn, Pretoria	Branch Code: 011245	Account Number: 013007971
	COMPU	LSORY CLIENT PAYMENT	CODE (to be completed or	n deposit slip)
Service/transaction	Ove	r the counter payments	E	FT, Internet, Wire, Electronic payments
Fees: See CAR Part 187.00.10				
APPLICATION FOR EXEMPTION IN TERMS OF PART 92, 92.00.3(1) READ WITH				
PART 11, 11.04.1(1) TO BE EXEMPTED FROM PART 92.00.2(b) OF THE CIVIL				
AVIATION REGULATIONS OF 2011, AS AMENDED				

(Please mark with an 'X')

EXEMPTION	SPECIAL EXEMPTION	
STATE OF EXEMPTION REQUIRED:	STATE OF ORIGON	
	STATE OF REGISTRY	
	STATE OF DESTINATION	
	STATE OF TRANSIT	
	STATE OF OVERFLIGHT	

NOTES :

- 1. This application must be signed by the applicant.
- 2. The processing of the exemption will only begin once payment has been received in full and verified by the SACAA finance division.
- 3. Please allow 30 working days for the processing of an exemption.
- 4. Please note that all outstanding documentation must be submitted before the exemption may be processed.
- 5. Please note that it is the responsibility of the applicant to ensure that all documentation and information provided are correct.

The Director of Civil Aviation South African Civil Aviation Authority Private Bag X73 Halfway House 1685 South Africa

Attention: Senior Manager: Dangerous Goods & Cargo Security

1. APPLICANT DETAILS				
Full name of the applicant				
TRADE NAME (if any)				
Physical address				
Postal address				
			Postal code	
Telephone number		Fax number		
Cellular number		E-mail		
Contact person		Contact person designation		

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1.	EXEMPTION DETAILS:		
a.	Forbidden dangerous good (Full supporting technical d is not sufficient)	ls proper shipping name/s, un number ata to be submitted as annexures. Ple	/s and classification. ease submit as an annexure if space
b.	Reason why it is essential	the article/s or substance must be carr	ried by air:
			,
C.	Specified safety and contro by the ICAO Technical Inst	I measures which will achieve a level	of safety equivalent to that provided
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d.	Specified security measure	es to ensure the security of the danger	ous goods:
	The proposed peakesing		
e.	The proposed packaging:		
f.	The quantities to be carrie	d:	
	1		
g.	Full name and details of a submitted):	ir operator (<i>If foreign operator, a foreig</i>	n operators permit needs to be
h.	Any special handling requi	ired and any special emergency respor	nse information:
	· · · · · · · · · · · · · · · · · · ·		
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i.	Name and address of Con	signor	
		·····	
j.	Name and address of Con	signee	
k.	Name and address of end	user/s of forbidden dangerous goods	
		5 5	
I.	Name of airport of depart	ure and country:	
m.	Name of airport of destinat	ion and country	
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n.	n. Full details of the proposed dates of transport and routing. (Please provide details of states of departure, overflight, transit and destination)				
-					
2. D	ocuments to be submit				
a.	Package performance	test certificates			
b.	Shipper's declaration				
<u>с.</u> d.	Air waybills	es/ material safety data sheets			
и. е.	End user certificate/s				
f.		registration and airworthiness			
g.	Dangerous goods train				
h.		port authorities applicable			
i.	-	n certificate from SAPS (If Class 1 Dange	erous Goods-		
	explosives)				
3 4	dditional documents si	Ibmitted			
J . A	3. Additional documents submitted				
4 D	eclaration – Responsib	le Person			
	4. Declaration – Responsible Person				
	Responsible Person, hereby certify that the above mentioned information provided is correct in all respects				
and that all documentation submitted is valid.					
NAMES, SIGNATURES AND CAPACITIES OF OPERATOR'S REPRESENTATIVES					
SIGNI			DATE		
SIGNA	ATURE AND CAPACITY	NAME IN BLOCK LETTERS	DATE		
SIGN	ATURE AND CAPACITY	NAME IN BLOCK LETTERS	DATE		