



**CIVIL AVIATION DEPARTMENT**  
**MINISTRY OF TOURISM AND CIVIL AVIATION**

Male'  
Republic of Maldives

**REQUEST FORM FOR PUBLICATIONS ISSUED BY**  
**CIVIL AVIATION DEPARTMENT**

Please forward me the following publication(s) *(Please tick off the desired publication)*

<b>Publication</b>	<b>Qty</b>
<input type="checkbox"/> Civil Aviation Regulations (CAR)	_____
<input type="checkbox"/> Aeronautical Information Publication (AIP)	_____
<input type="checkbox"/> Maldivian Airworthiness Requirements (MAR)	_____
<input type="checkbox"/> Air Safety Circular (ASC)	_____

addressed to:

Name: \_\_\_\_\_

Company: \_\_\_\_\_

Postal address: \_\_\_\_\_

\_\_\_\_\_ code: \_\_\_\_\_

Tel No: \_\_\_\_\_ Fax No \_\_\_\_\_

Enclosed, please find the payment by \_\_\_\_\_ in the amount of \_\_\_\_\_

**INFORMATION:**

1- *Return address:*

*Civil Aviation Department  
Ministry of Transport and Civil Aviation  
PA Complex, 7th Floor  
Hilaalee Magu  
Male'  
Rep of Maldives*

2. *Prices for the publications above are as follows:*

*Civil Aviation Regulations (CAR) -US\$25  
Aeronautical Information Publication (AIP) -US\$35 annual subscription fee US\$ 35  
Maldivian Airworthiness Requirements (MAR) -US\$15  
Air Safety Circular (ASC) -US\$15*

3. *Payment should be made payable to Civil Aviation Department by check or bank draft in Maldivian Rufiyaa or US dollars.*

4. *The documents will be delivered once the payment is settled.*

11. If purchased, give:-

- (a) Purchase contract No and Date: \_\_\_\_\_
- (b) Bill of Sale No. and Date \_\_\_\_\_ *(Please submit the original)*

12. Import Permit No. and Date \_\_\_\_\_

13. Have you cleared the aircraft through Customs? *Please submit original customs clearance certificate.*

14. Have you obtained a ferry permit?  
Indicate approval No. and Date: \_\_\_\_\_

15. Are you in possession of an A.O.C? *Give details:-* \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

16. If the aircraft is leased, give details of the lease along with an attested copy of the lease agreement.  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I hereby certify that I have been authorised to make this application and the statements made herein are true and correct to the best of my knowledge.

Signature : \_\_\_\_\_  
Name : \_\_\_\_\_  
Designation : \_\_\_\_\_  
Date : \_\_\_\_\_

