

Special Events and Unusual Aerial Activity - Application

This form can be filled in on screen (preferred method) then printed, signed and submitted as instructed. Alternatively, print, then complete in BLOCK CAPITALS using black or dark blue ink

Please read the attached Guidance Notes before completing this form.



1. EXEMPTION OR PERMISSION REQUIRED	PREVIOUS PAndE
(Please tick appropriate box)	Please list any previous PAndE's
Dropping of Articles (ANO Article 129) ☐	PAndE
Overtaking Rule SERA 3210 (c)(3) ☐	PAndE
500' Rule Rule 5 (3)(b) SERA.5005 (f)(2) ☐	PAndE
Land after Rule (ANO Rule 11) ☐	PAndE
1000' Rule Rule 5 (3)(c) SERA.5005 (f)(1) ☐	
Other (please specify)	

2. ACTIVITY DETAILS	
Location of activity	
Ordnance Survey Grid Ref :	1:50,000 scale or attach a copy of previous PAndE Schedule 1
Date of the Activity	Local Time of the Activity
Description of Flying Activity	
.....*	
Name of Applicant	
Address	
.....	
E-mail	Daytime Contact Tel No
Aircraft Operator	Aircraft Operator
Aircraft Type	Aircraft Type
Aircraft Registration	Aircraft Registration
Pilot's Name	Pilot's Name
Pilot's Experience	Pilot's Experience
.....	
*(continue on a separate sheet)	

3. RULE 5(3)(b) SERA.5005 (f)(2) APPLICATIONS
Name of Event/Airfield
Name of the Event Organiser (Person Responsible for Flying Activity)
Address
.....
E-mail
Daytime Contact Tel No.
SITE LAYOUT and LOCATION
An up-to-date 1:50,000 scale Ordnance Survey map (or colour copy) must be enclosed to show the event location and the layout of the site including:
- The Display axis or axes - Boundaries of the display area - Spectator's enclosures and car parks.

4. CONSULTATION WITH EMERGENCY SERVICES

Name of Police Authority consulted

.....

Contact name Telephone No.

Name of Coastguard and/or Port Authority consulted (Coastal sites)

.....

Contact name Telephone No.

5. AIRSPACE REQUIREMENTS LOW FLYING AND DROPPING OF ARTICLES APPLICATIONS

NOTAM extending 2000' vertically and 1.5nm horizontally will be automatically issued.

For any other requirements please complete the following:

maximum height required feet amsl maximum radius from the event site nm

any other information (holding patterns etc.)

.....

Air Traffic Authority consulted (for events in controlled airspace)

.....

Contact name Telephone No.

6. CERTIFICATE OF COMPLIANCE BY THE APPLICANT

I, (Name)

being the person responsible for the Aerial Activity

at

on 20

Hereby certify that the activity will be organised in accordance with current regulations and any relevant provisions of CAP 403.

Signed Date 20

7. SUBMISSION INSTRUCTIONS	SUBMISSION CHECKLIST
Send your completed application and payment forms to: Email: ga@caa.co.uk Together with any attachments and appropriate payment in accordance with the CAA Official Scheme of Charges No. 5 to arrive at least 28 days before the event. Failure to supply a correct OS.GR map to the correct scale will delay your application. A further copy of the notification form, less attachments and payment should be forwarded, where applicable, to: Airspace Regulation CAA House 45-59 Kingsway London WC2B 6TE Email: ausops@caa.co.uk to arrive at least 42 days before the event	1. Correctly scaled map ☐ 2. Correct OS.GR ☐ 3. All relevant sections completed and Section 6 signed ☐

8. PAYMENT METHODS

All fees must be paid in advance.

Failure to do so will delay your application.

Please complete the attached PAYMENT AUTHORISATION form and send with this application.