



Civil Aviation Authority of Sri Lanka

No: 152-1, Minuwangoda Road, Katunayake

Telephone No. 94-11-2358800, Fax: 94-11-2304644,

E-mail: info@caa.lk, Website: <http://www.caa.lk>

CAA/AVSEC/002

APPLICATION - GRANT APPROVAL FOR THE CARRIAGE OF MUNITIONS, EXPLOSIVES (Class 01 DG) OR ANY OTHER SECURITY RESTRICTED ARTICLES BY AIR

| A. Approval Type [please (✓) tick] | | | | | | |
|--|--|---|---|---|---|-----|
| <input type="checkbox"/> Initial issue | <input type="checkbox"/> Amendment - Date of initial Approval: | D | D | M | M | Y Y |

Note 1: For amendments please provide only details which should be amended in the initial approval

Note 2: Incomplete Applications and Applications without proper supporting documents will be rejected.

Note 3: Fees not applicable for State and Diplomatic Travelers.

| B. Application Type for Approval [please (✓) tick] | |
|--|---|
| 1. | Carriage of Munitions in Hold Baggage (Ministry of Defence Approval & fees not applicable for transits / transfers) |
| 2. | Carriage of Munitions as Air Cargo (Ministry of Defence Approval & fees not applicable for transits / transfers) |
| 3. | Carriage of Explosives – Class 01 DG (Fees not applicable) |
| 4. | Carriage of Any Other Security Restricted Articles (Ministry of Defence Approval & fees not applicable) |

The applicant must submit this application and Originals or certified true copies of following documents to the Civil Aviation Authority of Sri Lanka for approval **before 03 working days** of intended flight of carriage.

- Approval from the Ministry of Defence (if Applicable)
- Relevant Airway Bill (if Applicable)
- Passport Details (if Applicable)

| C. Details of the Applicant / Company | | | |
|---------------------------------------|----------------|----|-----|
| 1. | Name | | |
| 2. | Postal Address | | |
| 3. | Telephone | 4. | Fax |
| 5. | E-mail | | |

| D. Details of the Approval from the Ministry of Defence | | | |
|---|--------------|----|------|
| 1. | Reference No | 2. | Date |

| E. Details of the Flight/s | | | |
|----------------------------|--|----|--------|
| 1. | Name of the Airline & Contact Details: | | |
| 2. | Date: | 3. | Time: |
| 4. | Flight No: | 5. | Route: |



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| F. Details of the Carriage | | | | |
|-----------------------------------|---|------|------|-------------|
| 1. | If items are in the Hold Baggage, Details of relevant Passengers | # | Name | Passport No |
| | | i. | | |
| | | ii. | | |
| | | iii. | | |
| | | iv. | | |
| | | v. | | |
| | | vi. | | |
| | | vii. | | |
| 2. | If a cargo shipment, Airway Bill No: | | | |
| 3. | Details of Munitions (Make, Serial, Model etc.) / Explosives (Class 01 DG) / Any Other Security Restricted Articles (Description, Quantity etc.) including other supplementary accessories as applicable. | | | |
| | | | | |

Note 4: Please attach further details on a separate sheet if necessary.

Note 5: Please contact Aviation Security Section for payment details.

| G. Declaration | | | |
|--|--|--------|--|
| I hereby apply the approval for carriage of Munitions / Explosives (Class 01 DG) / Any Other Security Restricted Articles specified in Section F by Air and certify that the information given in this application are true and correct. | | | |
| Name: | | Title: | |
| Signature: | | Date: | |



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| Official Use Only | | | |
|--|--|--------------|--|
| Recommendation for the approval by the Civil Aviation Inspector <input type="checkbox"/> Yes <input type="checkbox"/> No | | | |
| Instructions to the Civil Aviation Officer: | | | |
| | | | |
| Name: | | Designation: | |
| Signature: | | Date: | |
| Remarks by Civil Aviation Officer: | | | |
| | | | |