



Appendix – D - 2

**Application for Renewal of Approval for Handling / Transporting
Dangerous Goods by Air**

1. Name of the Operator :-
2. Name of the Chief Executive Officer :-
3. Postal Address :-
.....
4. Appointed Dangerous Goods Co-ordinator (DGC)
(Person within the operator with overall responsibility for the transport of dangerous goods by air)
 - i. Name :-
 - ii. Contact Details
 - e) Address :
.....
 - f) Telephone :
 - g) E-mail :
 - h) Fax :
5. Types / Nature of Dangerous Goods, the Operator wish to transport :-
6. Destinations where the Operator intends transporting Dangerous Goods from/to :-
7. Statement of the Dangerous Goods Co-ordinator :
I certify that the findings of last Air carrier inspection report were rectified.
(Please enclose proof to support the above statement if applicable.)

.....
Signature of the Dangerous Goods Co-ordinator

Name

Official Stamp

Date :