



Croatian Civil Aviation Agency

Zahtjev za izdavanje odobrenja za izvanaerodromsko slijetanje i uzlijetanje helikoptera
Application for helicopter operations to and from natural helicopter landing sites

Upravna pristojba / *Administrative fee 20,00 kn*

Obrazac zahtjeva mora biti popunjen i priloženi svi traženi dokumenti kako bi se po njemu moglo postupati.
Only completed application form with submitted documents will be processed.

Obrazac zahtjeva podnosi se zajedno s priloženom dokumentacijom na adresu:

The form shall be submitted together with appendices to:

Hrvatska agencija za civilno zrakoplovstvo / Croatian Civil Aviation Agency

Ulica grada Vukovara 284; 10 000 Zagreb_Tel.: +385 1 2369 350; Fax.: +385 1 2369 351

e-mail: flight-authorization@ccaa.hr

✈ Ime i prezime ili naziv operatora / *Name of the Operator (natural or legal person)*

✈ Adresa / *Address*

✈ Kontakti / *Contacts*

Broj telefona (fiksni) / *Phone No.*

Broj telefona (mobilni) / *Mobile phone No*

E-mail:

✈ Informacije o helikopteru / *Helicopter Information:*

Tip helikoptera / *Helicopter type.*

Registarska oznaka / *Registration marks:*

Broj putničkih sjedala / *Pax seats.*

MTOM (kg):

✈ Vrsta operacija / *Type of operations:*

Nekomercijalne operacije /
Non-commercial Operations

Specijalizirane operacije (radovi iz
zraka) / *Specialized Operations*
(Aerial Work)

Komercijalni zračni prijevoz /
Commercial Air Transport



Croatian Civil Aviation Agency

✈ Datum ili vremensko razdoblje za koje se traži odobrenje / *Date or requested period of operation*

Od / from:

Do / until:

✈ Podaci o pilotu -ima/ *Pilot information:*

	Ime i prezime pilota <i>Pilot name and surname</i>	Broj pilotske dozvole i datum valjanosti ovlaštenja <i>Licence No/ Ratings valid till</i>	Zdravstvena sposobnost Kategorija i valjanost <i>Medical class/Exp date</i>	<i>English Proficiency Level Exp Date For foreign pilots</i>
1.				
2.				
3.				
4.				
5.				

✈ Priložena dokumentacija / *Accompanying documents (copies of):*

Hrvatski operatori (nekomercijalni)

- pilotska knjižica letenja
- preslika pilotske dozvole i certifikata o zdravstvenoj sposobnosti ukoliko nije izdana od strane HACZ
- potvrda o osiguranju izdana u skladu sa zahtjevima Uredbe (EZ) 785/2004

Foreign operators:

Commercial operations:

- AOC or other applicable certificate or equivalent for requested type of operations
- Standard Operating Procedure or applicable part of the OM in English language (*third country operators*)
- Pilot licence
- Pilot log book
- Pilot medical certificate
- Certificate of Airworthiness
- Airworthiness Review Certificate (if applicable)
- Insurance Certificate issued in accordance with EC Regulation 785/2004
- Certificate of Registration
- Noise certificate – if applicable
- Aircraft Radio License
- Copy of the last flight in Airplane Technical Log
- Latest Maintenance Release (*third country operators*)

Non-commercial operations:

- Pilot licence
- Pilot log book
- Pilot medical certificate
- Certificate of Airworthiness
- Airworthiness Review Certificate (if applicable)
- EASA OPS NCC Declaration (*EU operators if applicable*)
- Insurance Certificate issued in accordance with EC Regulation 785/2004
- Certificate of Registration
- Noise certificate – if applicable
- Aircraft Radio License

✈ Izjava operatora helikoptera / *Statement of the helicopter operator*

Ovime izjavljujem da prirodno mjesto za slijetanje helikoptera i okolni prostor udovoljava uvjetima iz članka 7. Pravilnika o izvanaerodromskom slijetanju i uzlijetanju helikoptera (Narodne novine 57/19) te da će se operacije izvanaerodromskog slijetanja i uzlijetanja helikoptera obavljati sukladno tom Pravilniku i drugim propisima primjenjivim na vrstu operacije i tip helikoptera.

Hereby I declare that natural landing operating site(s) and surrounding area(s) comply with the requirements of the Article 7 of the Regulation on helicopter operations to and from natural helicopter landing sites (Official Gazette 57/19) and that helicopter operations to the natural helicopter landing sites will be conducted in accordance with that Regulation and other regulations applicable to the type of operations and helicopter type.

Izjavljujem da su svi podaci u ovom zahtjevu točni i istiniti.

I hereby declare that all information given in this form are true and correct.

Ime, prezime i potpis odgovorne osobe / *Name, surname, position and signature of the responsible person*

--	--

Mjesto/ *Place*

Datum/ *Date*

--	--