



APPLICATION FOR HELICOPTER EXTERNAL LOAD OPERATIONS IN TERMS OF CAR PART 133

1 OPERATOR:

Name _____ License Number _____

Contact Person: _____ Tel: _____

Fax: _____

2 OPERATION: Date _____ Time: ____ h ____ to ____ h ____

Location: _____

Description: _____

Load: _____

Strops: (Type) _____ (Length) _____ (Strength) _____

3 HELICOPTER: Type _____ Registration **ZS-**_____

NB: Performance Graphs to be attached.

4 AIRCREW: Name _____ Duty: _____

License number _____

Name _____ Duty: _____

License number _____

Name _____ Duty: _____

License number _____

5 FLIGHT DETAIL

Escape Routes: _____

Lift 1 ETD: ____ h ____ Weight of Load: _____(Kg/Lbs.)

Lift 2 ETD: ____ h ____ Weight of Load: _____(Kg/Lbs.)

Lift 3 ETD: ____ h ____ Weight of Load: _____(Kg/Lbs.)

Lift 4 ETD: ____ h ____ Weight of Load: _____(Kg/Lbs.)

Total Elapse time: _____ hrs _____ min

6 LANDING AREA

Attached is a plan view drawing/photographs of the area indicating the following:
Location, Position in relation to buildings and structures, Size and any Telephone,
or high-tension wires or any other obstacles within 500m of the area.

7 THIRD PARTY INTERESTS

7.1 Confirm that: Measures are in place for crowd control. **YES/NO**

Written permission obtained from landowner(s). **YES/NO**

Written permission obtained from local authority. **YES/NO**



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- 7.2 The route along which the load is to be flown complies with the requirements of Rules of the Air 3.10(2).
- 7.3 No flight will be within 50 meters, measured horizontally, from an open-air assembly of people.
- 7.4 Copy of Traffic and Emergency Services arrangements attached.

8 DECLARATION

I, _____ the undersigned, in my capacity as _____ of _____ hereby confirm that the above mentioned information is true and correct.

I make this application to the Commissioner, on the information supplied, in terms of Civil Aviation Regulations of 1997, Part 127 and Part 133, for the approval of this flight.

I further confirm full compliance with all relevant, prescribed, provisions as set out in the Aviation Act, no. 74 of 1962, the Air Navigation Regulations of 1976, the Civil Aviation Regulations of 1997, the Air Services Licensing Act, no 115 of 1990, the Domestic Air Services Regulations of 1991 and the Operations Manual of _____ .

SIGNATURE: _____

DATE: _____

PLACE: _____

FOR OFFICE USE

*Kindly attaches numbered annexes to this form for detailed explanations if necessary.

THIS APPLICATION MUST BE SUBMITTED AT LEAST 7 WORKING DAYS PRIOR TO THE FLIGHT