

**BORANG PERMOHONAN BAGI PERMIT TAHUNAN MEMBAWA BARANGAN BERBAHAYA MELALUI KARGO**

*Application Form For Annual Permit To Carry Dangerous Goods As Cargo*



**No. Dokumen :**

*No. Document*

**CAAM/AV/DGU/10/19**

**Tarikh Permohonan:**

*Application Date*

**Tarikh Semakan:**

*Revision Date*

**ARAHAN**

**Instructions**

1. Setiap permohonan hendaklah menggunakan borang CAAM/AV/DGU/10/19 dan akan diproses dalam tempoh 30 hari (waktu bekerja)  
*Each application must use CAAM/AV/DGU/10/19 form and be processed within 30 days (working days).*
2. Kegagalan untuk melengkapkan borang ini sepenuhnya boleh mengakibatkan kelewatan dalam memproses permohonan  
*Failure to fill in this form completely may result in a delay in processing the application.*
3. Setiap permohonan melalui pengisian borang ini bukan satu kelulusan rasmi dari Pihak Berkuasa Penerbangan Awam Malaysia  
*The application of this form does not itself constitute approval from CAAM.*
4. Kelulusan permohonan Permit Tahunan Membawa Barangan Berbahaya melalui kargo akan diberikan setelah Pihak Berkuasa Penerbangan Awam berpuas hati dengan pematuhan terhadap segala prosedur yang ditetapkan.  
*Approval of Annual Permit To Carry Dangerous Goods As Cargo will be issued after CAAM is satisfied with the compliance to the procedures.*
5. Setiap permohonan akan dikenakan caj sebanyak RM 5000.00 bagi permohonan baru dan permohonan memperbaharui. Semua caj yang dikenakan adalah berdasarkan Peraturan-Peraturan Penerbangan Awam (FI DAN CAJ) 2016  
*Each application will charge RM 5000.00 for the new application and renewal application. All charges are based on Civil Aviation Regulations (FEE AND CHARGES) 2016.*
6. Permohonan yang lengkap beserta dokumen sokongan hendaklah dihantar kepada :-  
*Please submit completed form with the supporting document to:*

Aviation Security Division  
Civil Aviation Authority Malaysia  
Level1, Block Podium B, Precinct 4,  
62618 Putrajaya,  
MALAYSIA  
Tel : 03 8871 4051  
Fax: 03 8871 4052

## GENERAL INFORMATION

The full legal name of the operator :

(Please tick (√) as appropriate)

**New**

**Renewal**

Operating / Trading Name (if different from above):

## OPERATOR INFORMATION

### DANGEROUS GOODS COORDINATOR

States the Individual's name and telephone number, the company of Dangerous Goods Coordinator or designated person(s), and his/her role(s) concerning the administration of the company's dangerous goods program.

Name :

Designation / Job title:

Address for the person :

Telephone :

Fax :

Email :

Details of the operator staff in Malaysia responsible for the carriage of dangerous goods by air:

Name :

Designation / Job title:

Address for the person :

Telephone :

Fax :

Email :

Details of a ground handling agent and/or other agents with responsibility for the handling of dangerous goods on behalf of the operator:

Name :

Designation / Job title:

Address for the person :

Telephone :

Fax :

Email :

## APPLICATION CHECKLIST AND SUPPORTING DOCUMENTS CHECKLIST

Please ensure that the following supporting documents are submitted with the application form:-

NO	DESCRIPTION	√																																												
1.	Copy of valid Air Operator Certificate (AOC). <b>Please attach the document.</b>																																													
2.	Approval for the Carriage of Dangerous Goods / Dangerous Goods Permit issued by the State of the Operator. <b>Please attach the document.</b>																																													
3.	The operator requires its employees to be trained in dangerous goods. <b>Please attach Training Records / Staff Training Certificates.</b>  <input type="checkbox"/> Initial      or <input type="checkbox"/> Recurrent training within 24 months of previous training																																													
4.	<b>Please attach valid dangerous goods training programme approval.</b>																																													
5.	<b>Please attach the latest operator dangerous goods handling and acceptance procedure.</b>																																													
6.	<b>Please attach Staff Training Records / Training Certificates</b> of a ground handling agent and/or other agents with responsibility for handling dangerous goods on behalf of the operator :  <input type="checkbox"/> Initial      or <input type="checkbox"/> Recurrent training within 24 months of previous training																																													
7.	<p><b>Please attach the list of Dangerous Goods Classes handled previous year as per below :</b></p> <table border="1" style="width: 100%; border-collapse: collapse; margin-left: 20px;"> <thead> <tr> <th style="width: 30%;">Class of Dangerous Goods</th> <th style="width: 3%;">1</th> <th style="width: 3%;">2</th> <th style="width: 3%;">3</th> <th style="width: 3%;">4</th> <th style="width: 3%;">5</th> <th style="width: 3%;">6</th> <th style="width: 3%;">7</th> <th style="width: 3%;">8</th> <th style="width: 3%;">9</th> <th style="width: 10%;">Sub-total</th> </tr> </thead> <tbody> <tr> <td>Number of inbound consignments carried</td> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> <tr> <td>Number of outbound consignments carried</td> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> <tr> <td colspan="10" style="text-align: right;"><b>Total</b></td> <td></td> </tr> </tbody> </table>	Class of Dangerous Goods	1	2	3	4	5	6	7	8	9	Sub-total	Number of inbound consignments carried											Number of outbound consignments carried											<b>Total</b>											
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Number of outbound consignments carried																																														
<b>Total</b>																																														
8.	<p><b>Types of Operations (Please tick (√) as appropriate) :</b></p> <div style="display: flex; flex-wrap: wrap;"> <div style="width: 50%;"><input type="checkbox"/> Domestic destinations</div> <div style="width: 50%;"><input type="checkbox"/> International destination</div> <div style="width: 50%;"><input type="checkbox"/> Scheduled operations</div> <div style="width: 50%;"><input type="checkbox"/> Charter operations</div> <div style="width: 50%;"><input type="checkbox"/> Passenger and cargo operations</div> <div style="width: 50%;"><input type="checkbox"/> Cargo aircraft only</div> <div style="width: 50%;"><input type="checkbox"/> Helicopter</div> <div style="width: 50%;"><input type="checkbox"/> Medical evacuation operations</div> </div>																																													

### ACKNOWLEDGEMENT

I hereby certify that:-

- A. All the supporting documents which are declared above are duly attached;
- B. Failure to submit complete supporting documents may result in an undue delay in processing the application.

Name and Designation

Signature, Company Stamp & Date

### FOR OFFICIAL USE ONLY

*Untuk Kegunaan Pejabat*

Received By :

Received Date :

Signature :