



CIVIL AVIATION AUTHORITY OF MALAYSIA
FLIGHT OPERATIONS DIVISION
DANGEROUS GOODS UNIT
APPLICATION FOR THE APPROVAL OF
CARRIAGE OF DANGEROUS GOODS BY AIR
UNDER SPECIAL PROVISION

CAAM/BOP/3/04-1

GENERAL INFORMATION

Note - This form shall be used for requests to transport dangerous goods by air under special provision of the ICAO Technical Instructions for the Safe Transport of Dangerous Goods by Air (Doc 9284). If there is insufficient space to list all items, they can be listed on a separate sheet.

1. This form is for applications related to the approval of Special Provisions for the transport of dangerous goods by air.
2. The form must be typewritten, complete, and bear the original company stamp.
3. All documents listed in the Checklist must be attached, clear, and legible; failure to provide a complete submission will result in processing delays.
4. All applications to transport dangerous goods by air are subject to the laws and regulations of Malaysia and ICAO standards.
5. Submission of this form does not constitute approval. The technical evaluation and audit process will require additional time depending on the complexity of the safety demonstration and the applicant's responsiveness to findings.
6. Final approval will be issued within seven (7) working days only after CAAM is fully satisfied that equivalent safety has been successfully demonstrated.
7. Completed applications may be submitted via email to:

Civil Aviation Authority of Malaysia (CAAM)

Dangerous Goods Unit,
Flight Operations Division
Level 2, Block Podium B, Precinct 4, 62618
Putrajaya, MALAYSIA
Email / E-mel: ops.dg@caam.gov.my
Tel: 03 8871 4099 **Fax:** 03 8890 1641

CAAM Bank Account:

Public Islamic Bank
3811 3402 15
SWIFT Code: PBBEMYKL XXX



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APPLICATION CHECKLIST

NO.	SUPPORTING DOCUMENTS	SELECT THE RELEVANT BOX		
		✓	X	N/A
1.	Official letter of application.			
2.	Approval or permit from relevant agencies (e.g., RMP or DAEM if applicable).			
3.	End User Certificate (for government shipment if applicable).			
4.	Copy of the approval for the Special Provision from the State of Origin (if applicable).			
5.	Copy of dangerous goods declaration (DGD).			
6.	Copy of DG CAAM Card (person who signed the shipper declaration).			
7.	Aircraft type, registration, flight number.			
8.	Copy of Air Waybill (AWB).			
9.	Copy of Shipment routing details, including transit.			
10.	Copy of Overview Packing requirement and performance test summary.			
11.	Copy of Material Safety Data Sheet (if applicable).			
12.	Safety procedures during transport.			
13.	Emergency procedures for DG incidents.			
14.	Safety Risk Assessment from the airlines operator.			
15.	Airline operation approval (AOC, Ops Specs, DG Permit).			



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PART A – APPLICANT DETAILS

Name of Accountable Person	
Company Name & Address	
Company Registration No.	
Office Telephone No.	
Mobile No.	
Email/ Fax	

PART B – SHIPPER DETAILS (IF DIFFERENT FROM APPLICANT)

Name of Accountable Person	
Company Name & Address	
Company Registration No.	
Office Telephone No.	
Mobile No.	
Email/ Fax	

PART C – CONSIGNEE DETAILS (IF DIFFERENT FROM APPLICANT)

Name of Accountable Person	
Company Name & Address	
Company Registration No.	
Office Telephone No.	
Mobile No.	
Email/ Fax	



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PART D – DANGEROUS GOODS DETAILS

UN No.	
Proper Shipping Name	
Class/ Division & Compatibility Group	
Packing Instructions	
Number of Packages	
Type of Packages	
Gross Weight	

Note. – Please continue on another page, if necessary.

PART E – APPLICATION JUSTIFICATION

E.1. Reason for Application: Describe the operational necessity or circumstances requiring use of special provisions.

Note. – Please continue on another page, if necessary.



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PART E – APPLICATION JUSTIFICATION

E.2. Safety Risk Identification: Identify hazards, potential consequences and initial risks level.

Note. – Please continue on another page, if necessary.

PART E – APPLICATION JUSTIFICATION

E.3. Mitigation Measures: Outline control measures to reduce risks to an acceptable level.

Note. – Please continue on another page, if necessary.



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PART E – APPLICATION JUSTIFICATION

E.4. Equivalent Level of Safety: Demonstrate how the safety outcome remains equivalent to ICAO Technical Instructions.

Note. – Please continue on another page, if necessary

PART F – FLIGHT INFORMATION

Operator Name	
Aircraft Registration	
Flight No.	
Date of Flight	
Airport of Departure	
Airport of Transit	
Airport of Destination	
Air Waybill No.	



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PART G – DECLARATION

I hereby declare that all information provided is true and accurate. Any false declaration or failure to comply with the stated conditions shall render this approval null and void and may result in enforcement action under the Civil Aviation Regulations 2016.

Signature & Name
(with company stamp)

Date

PART H – FOR CAAM USE ONLY

Signature & Name of Officer /
Official Stamp

Date

Remarks (if any)