



## SWAZILAND CIVIL AVIATION AUTHORITY

SW/FSD/AGA/F/008

Application form for aerodrome classification, to be filled by the aerodrome operator  
Category applied for [see Civil Aviation Authority (Aerodrome) Regulation 7] :  I  II  III

### PART 1. PARTICULARS OF THE AERODROME OPERATOR

1.1 Full Name:
1.2 Trade Name:
1.3 Full Business / Residential address:
1.4 City:
1.5 Email address:
1.6 Telephone Number:

### PART 2 : AERODROME INFRASTRUCTURE & SERVICES

2.1 Name of the aerodrome:
2.5 Runway dimensions (length x width):
2.6 Air navigation aids (tick as much as applicable): <input type="checkbox"/> ILS <input type="checkbox"/> NDB <input type="checkbox"/> VOR <input type="checkbox"/> DME
2.7 Lights (tick as much as applicable) : <input type="checkbox"/> Approach lighting system <input type="checkbox"/> PAPI <input type="checkbox"/> Airfield lights (specify)
2.8 Category for Rescue & fire fighting :
2.9 Air traffic control service (tick as much as applicable) : <input type="checkbox"/> Approach <input type="checkbox"/> Tower <input type="checkbox"/> Information

### PART 3 : TYPE OF OPERATIONS

3.1 Critical aircraft to be used:
3.2 Type Of operations tick as much as applicable) : <input type="checkbox"/> Commercial <input type="checkbox"/> Domestic <input type="checkbox"/> International
3.3 Type of use: <input type="checkbox"/> Open to public use <input type="checkbox"/> Private

### PART 4 : SUPPORTING DOCUMENTS

4.1 Supporting Documents	
Mark the appropriate block	
<input type="checkbox"/> Layout & Plans	<input type="checkbox"/> Description of the fire & rescue equipment
<input type="checkbox"/> Description of the security measures	<input type="checkbox"/> Additional supporting document (specify)

The Aerodrome operator declares hereby that the particular provided in the application are true in every respect. Pursuant to Civil Aviation Authority (Aerodrome) Regulation 7, this constitutes an application for the classification of the aerodrome, as described in Parts 2 & 3 above.

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Name and title of the Applicant authorized person

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Signature

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Date