

Application for Exemption from AN(OT)O or Deviation from OTAR

Applicant Name: _____

E-mail: _____ Telephone: _____

Entity Type: **Operator** and Name: _____

Aircraft Reg Mark (If applicable): _____ Aircraft Serial No (If applicable): _____

Aircraft Type and Model (If Applicable): _____

Repeat Request: Yes No

Date: _____

Nature of requested Exemption or Deviation:

Enter brief details here

AN(OT)O or OTAR Regulation requiring exemption/deviation reference:

Enter reference here

Details of mitigation/controls established to maintain an equivalent level of safety:

Enter brief details here