



Doc No.: ECA/REG/AGA/F/004  
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Effective Date: 01-04-2024

**ESWATINI CIVIL AVIATION AUTHORITY**  
**ECA/REG/AGA/F/004**

Application form for exemption, to be filled by the operator

**PART 1. Particulars of the Applicant**

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:
1.7 Fax, Telex or other contact (if any)
1.8 The applicant declares hereby that the particular provided in the application are true in every respect
----- Signature
----- Date

**PART 2 : Particulars of the deviation**

2.1 Name of aerodrome:
2.2 Specification of regulations for which deviation is requested: ..... .....
2.3 Reasons for applying for deviation(s): ..... ..... .....

**PART 3: SUPPORTING DOCUMENTS**

3.1 Supporting Documents Mark the appropriate block <input type="checkbox"/> Aeronautical studies <input type="checkbox"/> Additional supporting document (specify) Description ..... ..... .....
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