

Send to:

Luftfartstilsynet / Civil Aviation Authority Norway
Postboks 243
8001 BODØ
NORWAY

Declaration of providers of apron management

Initial declaration

Amendment

Provider of apron management services (AMS)		
Organisation name:	Company register number:	
Address:	Zipcode:	City, country:
Telephone number:	E-mail address:	
Accountable manager:		
Telephone number:	E-mail address:	

Aerodrome(s) at which the apron management services are provided
Name(s) of aerodrome(s), separate by comma (,):

Regulatory fees may be charged in accordance with BSL A 1-2	
By signing this document the applicant declares that all information provided in this form is correct and can be documented.	
Relevant manuals and documentation as required in Easy Access Rules for Aerodromes (EU 139/2014) are attached with this declaration.	
Date, place:	Signature: