#### STATE OF ISRAEL MINISTRY OF TRANSPORT SECURITY DEPARTMENT



## General Aviation Arrival Application

#### **ASOC**

Aviation Security Operation Center Tel: +972(3) 9599800; Fax: +972(3)9599808

E-mail: asoc@int.gov.il

# GENERAL AVIATION APPLICATION FOR ARRIVAL TO ISRAEL AIRSPACE

#### Please read these instructions carefully to properly complete this form

#### **GENERAL INFORMATION**

This application will be used for General Aviation incoming flight, flown by non- Israeli licensed pilot, when applying for an arrival permit to the Israeli airspace, as required by AIP Israel.

It is the responsibility of the pilot in-command of the aircraft to verify that all the information filled-in, is complete and accurate and to certify it by signing the statement at the bottom of page 1 of the form. Operators of large fleets of business and private aircrafts may apply the MOT Security Department for certifying specific managers for the submittal and confirmation of arrival permit applications instead of the pilot-in command of the flight.

In any case it is the responsibility of the pilot-in command to verify that the flight to Israel is operated in compliance with the information submitted by this form e.g. the aircraft ID, the flight route, the crew members' identity and their personal information, the passengers identity and their personal information as filled-in in this form. The pilot in-command, shall nor submit a Flight-Plan, neither depart to Israel before verifying that an arrival permit was granted by the Aviation Security Operation Center (ASOC) of the Israeli MOT. The pilot in command will certify the above by signing the statement at page 4

The applicant must sign and date the application. If you do not sign the form, the application will not be processed and returned as incomplete.

Use black ink. Type or print clearly using capital letters. If an item does not apply to you, write "N/A". If the answer is none, write "NONE".

The application and all supporting documentation must be submitted in English.

#### **SPECIFIC INSTRUCTIONS**

(Items not listed are self-explanatory)

Please write out all your names, date of birth and nationality as they appear in your passport. Use no more than one middle name for record purposes

**Applicant Name** – The pilot in-command should be the applicant for the arrival application.

**Company Name** – the Company operating the aircraft (if applicable).

**Handling Agency Name** – The handling agency in Israel (if applicable).

**Airports** – All airports names must be entered by using their ICAO 4 digits codes.

Time - All times must be entered using UTC time.

**Contact Person** – A contact person must be a specific person (not an entity) who can verify the identity of the passengers and the purpose of flight.

Family Names - (Last Name) Enter the Legal Name. If a person has two last names, include both and use a hyphen (-) between the names.

**Date f Birth -** Enter eight digits to provide a date of birth (example: May 1<sup>st</sup> , 1979, should be written 01/05/1979).

**Addresses -** Enter the physical street address. This must include a street number and name. Do not put a post office box (P.O. Box) number.

**Telephone Numbers -** Enter a telephone numbers with country code area code.

#### **FILL OUT INSTRUCTIONS**

#### Overview

Word® automatic fill-in forms use the features provided with Microsoft® Word products. Currently, there is no computation, validation or verification of the information you enter and you are still responsible for entering all required information (instructions may require some information to be handwritten on the form).

#### **Software Requirements**

To view, complete and print IRS fill-in PDF forms you'll need the Microsoft® Word software installed on your computer.

#### Opening the Form

Your web browser may be configured with a Microsoft® Word plug-in to automatically open the file within your browser's window upon download. To download the file directly to disk, right click on the Results Page form title link then select "Save Target/Link As..." from the menu. Use Microsoft® Word to open the file.

Fill-in forms with the ability to save locally will generate a dialog box when opened with Microsoft® Word. The dialog box will indicate that the document is reserved and can be opened either by a password or in a 'read only' mode. Open the document in the 'read only' mode that will enable you to fill-in the required information into the appropriate data fields. You will be able to save the completed fill-in form under a different file name or to print it.

### Completing the Form

When opening the document in the automatic 'read only' mode, the cursor will be positioned on the first fill-in area or element. Enter the appropriate data in each box or field. To move from one field to the next, press the Tab key. You can also use your cursor to move from field to field. Place your cursor in the field you want to fill in and type.

Position the curser in check box and click your left mouse button to fill in checkboxes.

Some fields limit the maximum number of characters you can enter and may automatically advance to the next field.

For additional help with fill-in forms see the Microsoft® Word's online help information.

We always provide the latest versions of the forms. To avoid using outdated versions, we recommend that you do not permanently download them to your hard drive.

Forms on this site may be viewed, filled-in on the screen, printed and sent by Fax or E-mail.

#### Print the form

Microsoft® Word allow you to electronically save the information you have entered into your form and /or print a copy of the completed form before closing the file.

Note that some forms may be more than one page, or may be in "landscape" format. To print, use the PRINTER icon on the Print toolbar.

1.To print, use the **PRINTER** icon on the **Toolbar** or the **Print** command on the **File** drop-down main menu.

For form sizes larger than A4, check the FIT TO PAGE box in the print window or your form may be cut off at the bottom of the page.

Print the form, save a copy for yourself and sign your name where indicated.

#### Submit the form

Please submit your completed application by Fax or E-mail (if an electronic signature was entered to the form) to the ASOC. The application may be submitted via the handling agency in Israel.

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PLEASE REMOVE THIS PORTION BEFORE SUBMITTING TO ASOC.

(\*) - Mandatory Form GAS-15-06-07J

# **ASOC**

### STATE OF ISRAEL MINISTRY OF TRANSPORT SECURITY DEPARTMENT



General Aviation Arrival Application

Aviation Security Operation Center Tel: +972(3) 9599800; Fax: +972(3)9599808

E-mail: asoc@int.gov.il

Application Informati	on:						
Applicant Name: (*) Handling Agency in Israel: (Handling Agency Phone No.: Handling Agency Fax. No.: (Handling Agency Cell No.: Handling Agency E-mail:	+			Company Name: (*)  Company Phone No.: Company Fax. No.: (* Company Cell No.: (* Company E-mail: (** (**) – Fill-in if not subm	(**) + (**) + (**) + (**) + (**) + (**) + (**)	agency in IL	
Aircraft Information:							
AC Callsign: (*) AC Registration: (*) AC Make and Model: (*)		-		AC Nation ICAO Des	nality: (*) ignator: (*)		
Flight Information:							
Airport of Departure to Is ETD Date and Time(*) Airport of Arrival in Israe Landing Airports en route before Israel (*) ETA Date and Time(*) Purpose of Flight (*)	. ,		UTC	Airport of Departure ETD Date and Time(* Destination Airport A Landing Airports en route from Israel ETA Date and Time(*	broad (*)	UTC	
Contact Person In Isra  First Name: (*)  Last Name: (*)  Company Phone No.: (*)  Fax. No.:  Cell No.:  Home Phone No.: (*)  Connection to Flight: (*)	+ + + + + + + + + + + + + + + + + + +			Middle Name: ID (*) Company Name (*) Address (*) E-mail			
To: Ministry of Transport/Security Department - ASOC  I certify that all information submitted in this application to be true and correct based on my best personal knowledge. I am aware that if any of the foregoing information given by me is false, I may be subjected to any legal							
measures under the Israeli Law.  Full Name Signature Date							

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# General Aviation Arrival Application

Aviation Security Operation Center Tel: +972(3) 9599800; Fax: +972(3)9599808 E-mail: asoc@int.gov.il

Crew Information											
No	First Name (*)	Middle Name	Last Name (*)	Father Name	Date Of Birth (*)	Passport No. (*)	Nationality (*)	Home Phone (*)	Cell Phone	Business Phone	Position (*)

Pa	Passengers Information											
No	First Name (*)	Middle Name	Last Name (*)	Father Name	Date Of Birth (*)	Passport No. (*)	Nationality (*)	Home Phone (*)	Cell Phone	Business Phone	Coming in (*)	Going out (*)
			•							•	•	

## **ASOC**

STATE OF ISRAEL MINISTRY OF TRANSPORT SECURITY DEPARTMENT

General Aviation Arrival Application
Pilot in Command Statement



Aviation Security Operation Center Tel: +972(3) 9599800; Fax: +972(3)9599808 E-mail: asoc@int.gov.il

This statement is submitted in support of the General Aviation Arrival Application submitted							
by:							
Applicant Name: (*)		Company Nar	me: (*)				
Handling Agency Name: (*)			ot submitted via a handling agency in IL				
For the arrival of airci	raft :	( )	or outstand via a right angle of mine				
AC Registration: (*)	-						
Planned for:							
ETA Date (*)		ETA Time (*)	UTC				
To: Israel Ministry of T	ransport/S	ecurity Department - ASOC					
<b>y</b> . <b>y</b>	<b>r</b>	T					
Ι,		Captain In Command					
(Name)  (Pilot Licenses #)  herby certify that all information submitted in the above referred arrival application, to be true and correct based on my best personal knowledge. I am aware that if any of the information given by me is false, I may be subjected to any legal measures under the Israeli Law.							
I undertake to personally verify that the flight to Israel will be operated in compliance with the information submitted by the above referred arrival application e.g. the aircraft ID, the flight route, the crew members' identity and their personal information, the passengers' identity and their personal information as filled-in in the arrival application.							
I further undertake to personally verify that all passengers, crew members and their corresponding luggage and carry-on, will be subjected to security screening procedures before boarding the flight to Israel, in compliance with the international standards and good practice applicable for commercial flights.							
I further undertake to personally verify that the aircraft will be searched before each flight leg, as to avoid the introduction of threat articles on board of the aircraft.							

**Full Name** 

Signature

Date