APPLICATION FOR APPROVAL TO CARRY
DANGEROUS GOODS BY AIR
FOR MORE THAN 10 RETURN FLIGHTS
OVER A PERIOD OF 6 MONTHS
(BLOCK PERMIT)

(Please check ☑ as appropriate) ☐ Initial Issue ☐ Renewal

Instructions to Applicants

1. Applicants are required to complete this application form for a dangerous goods permit and submit it to CAAS no later than seven (7) days before the date of shipment.

2. The duly completed form shall be submitted by post, fax or e-mail to:

Dangerous Goods Permit Application
Airworthiness / Flight Operations Division
Civil Aviation Authority of Singapore
Singapore Changi Airport P O Box 1, Singapore 918141
E-mail: CAAS_dangerousgoods@caas.gov.sg

3. Failure to complete this form in full may result in a delay in processing your application.

4. To obtain the permit, applicants must submit the following supporting documents:

(a) For foreign carriers:
   i. Approval for the Carriage of Dangerous Goods / Dangerous Goods Permit issued by the State of the Operator
   ii. Air Operator’s Certificate (AOC)
   iii. Relevant extracts from the DG/Ops Manual based on the references provided in the checklist on page 4 of this application form (applicable for initial issue only or when there are updates to the DG/Ops Manual)

(b) For Singapore Air Operators:
   i. CAAS form “FO 127” – Operations Manual’s Dangerous Goods Segment
   ii. CAAS form “FO 137” – Application for an Authorization to carry Dangerous Goods in Normal Circumstances.

5. A fee of S$600 per permit is payable upon the issuance of a Block Permit.
6. Applicants granted with a Block Permit to carry dangerous goods must comply with the following:


   b. The holder of the permit shall immediately notify Airport Emergency Service Division of any dangerous goods incident or accident at Tel 65-65412525, and submit a report to CAAS using CAAS form AW139 Part 4 to this email address at caas_dfirs@caas.gov.sg within 24 hours of the incident/accident. The holder of the permit shall follow up with a detailed investigation report, within 14 days of the incident/accident occurring, containing the sequence of events that caused the incident/accident and the corrective measures taken to prevent a recurrence of such incidents/accidents.

   c. In cases where misdeclared or undeclared dangerous goods are discovered, the holder of the permit shall submit a report using CAAS form AW139 Part 4 to this email address at caas_dfirs@caas.gov.sg within 24 hours of the discovery.

7. The Permit may be withdrawn at any time without notice in the event of a violation of any of the conditions or regulations mentioned above.

8. Successful applicants for a **Block Permit** must note the following:

   a. To submit a monthly summary report attached hereto as **Form A** to CAAS at CAAS_dangerousgoods@caas.gov.sg not later than ten (10) days from the end of each month to which the report relates. A “nil” return is necessary.

   b. To retain all detailed records of dangerous goods consignments for at least 3 months after the date of carriage and produce these records to CAAS for inspection as requested.

   c. To obtain all necessary consent from the competent authorities of the States as they may impose restrictions on the carriage of dangerous goods on an aircraft that flies over the States in the course of its journey or on the territory of which it may land.

   d. To use the Block Permit within its validity period of 6 months.

   e. To submit a separate application to CAAS for renewal of a Block Permit.
APPLICATION FOR APPROVAL TO CARRY DANGEROUS GOODS BY AIR
(BLOCK PERMIT)

(Please check ☑ as appropriate)  ☐ Initial Issue  ☐ Renewal

DG Block Permit No: DGB /  Date of Expiry:

1. General Information

1.1 Name of the operator:

1.2 Name and contact details of person within the operator’s head office with overall responsibility for the carriage of dangerous goods by air.
   Name:
   Job title:
   Address:
   Phone:       Fax:
   Email:

1.3 Name and contact details of person in the operator’s Singapore office with overall responsibility for the carriage of dangerous goods by air.
   Name:
   Job title:
   Address:
   Phone:     Fax:
   Email:

1.4 Name and contact details of ground handling agent and/or other agents with responsibility for handling of dangerous goods on behalf of operator:
   Name:
   Job title:
   Address:
   Phone:     Fax:
   Email:
## 2. Operations Manual Dangerous Goods Segments (For Foreign Carriers Only)

### NATIONAL APPROVAL

<table>
<thead>
<tr>
<th>State of the Operator</th>
<th>Air Operator’s Certificate (AOC) Number</th>
<th>Valid from (dd/mm/yyyy)</th>
<th>to (dd/mm/yyyy)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Validity of dangerous goods permit issued by the State of the Operator</td>
<td>From (dd/mm/yyyy)</td>
<td>To (dd/mm/yyyy)</td>
<td></td>
</tr>
</tbody>
</table>

CAAS reserves the right to grant a Block Permit with a shorter permit period than that applied for if the validity of the Air Operator Certificate (AOC) and the national approval for the carriage of dangerous goods granted to the carrier by their national authority does not cover the full period of the permit applied for.

### NO DESCRIPTION REFERENCE FROM CARGO/OPS OR DG MANUAL REMARKS BY APPLICANT (IF REFERENCE NOT PROVIDED)

<table>
<thead>
<tr>
<th>1</th>
<th>DANGEROUS GOODS CO-ORDINATOR</th>
<th></th>
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</thead>
</table>
| 1.1 | States the Company Title and telephone number or Individual’s name and telephone number of the company Dangerous Goods Program Coordinator(s), or designated person(s) and his/her role(s) with respect to the administration of the company’s dangerous goods program | Name :  
Designation :  
Mobile No. :  
E-mail : |

### 2 TRAINING

| 2.1 | The operator requires its employees including agents acting for the operator to be trained in dangerous goods; (ICAO TI 7;4.10 / IATA DGR 9.7) – Attach Training Records |  |
| 2.2 | The operator has training programs that are reviewed and approved by the State of authority of the operator (ICAO TI 1;4.1.2 / IATA DGR 1.5.5) |  |
| 2.3 | The operator maintains dangerous goods training records of its employees. (ICAO TI 1;4.2.5 / IATA DGR 1.5.6) |  |
| 2.4 | The operator ensures knowledge is current by specifying the duration before recurrent training is required. (ICAO TI 1,4.2.3 / IATA DGR 1.5.0.3) |  |

### 3 EMERGENCY PROCEDURES & ACCIDENT/INCIDENT REPORTING

| 3.1 | Emergency response information is available to the pilot-in-command/other crew members (ICAO TI 7;4.9 / IATA DGR 9.5.1.2) |  |
| 3.2 | Procedures requiring the report of dangerous goods incidents and accidents to the authorities of the state in which it occurs. (ICAO TI 7;4.4 / IATA DGR 9.6.1) |  |
| 3.3 | Procedures requiring the report of undeclared or mis-declared dangerous goods discovered in cargo, mail or passenger baggage to the authorities of the state in which it occurs. (ICAO TI 7;4.5 / IATA DGR 9.6.2) |  |
| 3.4 | In the event of an aircraft accident or serious incident, the operator has procedures to provide information without delay to emergency service responders about dangerous goods on board (ICAO TI 7;4.7 / IATA DGR 9.6.3) |  |
3. **Declaration by Applicant**

I hereby declare that the information provided in this application and the accompanying documents are true and correct to the best of my knowledge. I understand that it is an offence under paragraph 61(1)(c) of the Air Navigation Order to make a false representation for the purpose of procuring this permit.

3.1 Name (in full):

3.2 Designation:

3.3 Signature & Company Stamp: Date:

This declaration shall be made by the person identified in paragraph 1.3 of this form.

4. **Billing Party Information**

   Name:
   
   Job title:
   
   Organisation:
   
   Address:

5. **Mailing Party of the Original Permit if different from Paragraph 1.3**

   Name:
   
   Job title:
   
   Organisation:
   
   Address:

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**FOR OFFICIAL USE ONLY**

<table>
<thead>
<tr>
<th>Issue / Renewal : Permit No : DGB /</th>
<th>Period of Validity :</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Name of Approving Officer:</th>
<th>Remarks:</th>
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</thead>
<tbody>
<tr>
<td>Signature &amp; Date:</td>
<td></td>
</tr>
</tbody>
</table>
Airline: _____

DANGEROUS GOODS BLOCK PERMIT CHECKLIST FORM

Application of block permit for carriage of Dangerous Goods

PART I – DETAILS OF ATTACHMENT

Please ensure that the following supporting documents are submitted alongside with the application form:-

<table>
<thead>
<tr>
<th></th>
<th>YES</th>
<th>NO</th>
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<tbody>
<tr>
<td>1.</td>
<td>Air Operator Certificate (AOC)</td>
<td>☐</td>
</tr>
<tr>
<td>2.</td>
<td>Approval for the Carriage of Dangerous Goods</td>
<td>☐</td>
</tr>
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<td></td>
<td>/ Dangerous Goods Permit issued by the State of the Operator</td>
<td></td>
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<tr>
<td>3.</td>
<td>Relevant extracts from the DG/Ops Manual</td>
<td>☐</td>
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<tr>
<td></td>
<td>(applicable for initial issue only or when there are updates to the DG/Ops Manual)</td>
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</tbody>
</table>

If any of the above documents is NOT attached, please specify the reason:-


PART II - ACKNOWLEDGEMENT

I hereby certify that:-

A. All the supporting documents which are declared above are duly attached;
B. Failure to submit complete supporting documents may result in undue delay in processing the application.

__________________________
Name & Designation

__________________________
Signature, Company Stamp & Date
MONTHLY REPORT OF CARRIAGE OF DANGEROUS GOODS
FOR THE MONTH OF [_________] / [_________] (YEAR)

In compliance with Permit No. _______________ issued to ________________[insert carrier’s name in full] (the Airline), I, ________________, on behalf of the Airline, hereby submit this report of the carriage of dangerous goods on board flights operated by the Airline during the month of _____________.

<table>
<thead>
<tr>
<th>Class of Dangerous Goods</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
<th>6</th>
<th>7</th>
<th>8</th>
<th>9</th>
<th>Sub-total</th>
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</thead>
<tbody>
<tr>
<td>Number of inbound consignments carried</td>
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<tr>
<td>Number of outbound consignments carried</td>
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<td>Grand Total</td>
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</tbody>
</table>

I confirm that all detailed records of the dangerous goods consignments referred to above will be retained for three months from the date of carriage and declare that all conditions of the Permit have been fully complied with.

______________________________  _________________________________
Name & Designation  Signature, Company Stamp & Date

Airline:
Address:
Phone:
Fax:
Email: