Please fill out the following information

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Application DetailsApplication Reference Number (ARN)

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Aircraft Type

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Manufacturer’s Serial Number [MSN]

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Registration mark

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Requested date of deregistration

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Reason for deregistration

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| --- | --- | --- | --- | --- |
| Contact details for new registryMust be completed except when aircraft is destroyed or permanently withdrawn from useRegistry name

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Contact Person

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|  |

Position

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|  |

E-mail address

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