

APPROVAL/REGISTRATION REQUEST FOR AUTHORIZED/REGISTERED HELIPORT AIP FORM

(GACAR PART 138)

| A. FOR APPLICANT USE | | | | | | | | |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------|---|-----|----------|--------|------|-------|
| HP 1.0: HELIPORT GENERAL INFORMATION | | | | | | | | |
| 1.1 Name of the Heliport Owner/Operator | | | | | | | | |
| 1.2 He | | | | | | | | |
| 1.3 Type of Heliport Surface/Elevated/Helideck/Shipboard | | | | | | | | |
| 1.4 Heliport National Identification Code (NIC) | | | | | | | | |
| HP 2.0: HELIPORT GEOGRAPHICAL AND TECHNICAL DATA | | | | | | | | |
| No. | Data Information (Description) | Data Information (To be filled with Heliport Operator) | | | | | | |
| 2.1 | Heliport Name | | | | | | | |
| 2.2 | Location Indicator | | | | | | | |
| 2.3 | Authorized or registered | | | | | | | |
| 2.4 | Person-In-Charge of the heliport | Name | | | | | | |
| 2.5 | Address /Tel /Email of Person In-Charge | Address | | | | | | |
| | | Mobile | | | | Email | | |
| 2.6 | Heliport direction and distance from city | | | | | | | |
| 2.7 | Geo Coordinates (WGS84) of TLOF or THR of FATO (If, Runway type FATO) Helicopter Stands (If, Other than TLOF) | TLOF: Latitude: "N; Longitude: "E. | | | | | | |
| | | FATO: Latitude: ° ' "N; Longitude: ° ' "E. STANDs: Latitude: ° ' "N; Longitude: ° ' "E. | | | | | | |
| 2.8 | Heliport Operations Hours | | | | | | | |
| 2.9 | TLOF and/or FATO Elevation M/FT | | | | | | | |
| 2.10 | TLOF and FATO Dimensions (M/FT), Surface and Slope | Description | n | Dim | nensions | Surfac | се | Slope |
| | | FATO | | | | | | |
| | | TLOF | | | | | | |
| | | Safety Area | а | | | | | |
| 2.11 | True BRG of FATO | | | | | | | |
| 2.12 | Heliport Declared Distances Available | TODAH | | | RTODAH | | LDAH | |
| | | | | | | | | |
| 2.13 | APP, FATO and TLOF lighting | | | | | | | |
| 2.14 | Remarks | | | | | | | |
| HP 3.0: HELIPORT OPERATOR DECLARATION: | | | | | | | | |
| We hereby certify that the forgoing information is correct in every respect and no relevant information has been withheld. Any change in the submitted information or change in heliport shall be informed to President of GACA. | | | | | | | | |
| Name of Operator/Person In-Charge | | | | | | | | |
| Signature of Operator/Person In-Charge | | | | | | | | |
| Date | | | | | | | | |

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