# BEACON INFORMATION

|  |  |  |  |
| --- | --- | --- | --- |
| 1.1 | Beacon Serial Number: | 1.2 | Beacon Manufacturer: |
| 1.3 | Beacon 15 Hex ID : | 1.4 | Beacon Model: |
| 1.5 | Beacon Type:    Fixed  Portable | 1.6 | COSPAS-SARSAT Type Approval Certificate Number: (If Known): |
| 1.7 | Beacon Homing Device:    121.5MHz  SART  Other  None | 1.8 | Beacon Activation Method:    Auto  Auto or Manual |

# AIRCRAFT INFORMATION

|  |  |  |  |
| --- | --- | --- | --- |
| 2.1 | Vehicle Type:  Multiple Engine Jet  Multiple Engine Propeller    Single Engine Jet  Single Engine Propeller    Helicopter | 2.2 | Aircraft usage: |
| 2.3 | Aircraft Manufacturer: | 2.4 | Aircraft Registration: |
| 2.5 | Aircraft Model: | 2.6 | Aircraft 24 Bit Address (Mode-S code): |
| 2.7 | Crew Capacity: | 2.8 | Aircraft Colour /Markings: |
| 2.9 | Passenger Capacity: | 3.0 | Aircraft Radio Equipment onboard:  VHF  HF  MF  SSB    Other: |
|  | Deployable Survival Craft/Equipment: |  | Fixed Survival Craft/Equipment: |

# OWNER/OPERATOR INFORMATION

|  |  |  |  |
| --- | --- | --- | --- |
|  | Owner/Operator |  |  |
| 3.1 | Name:      Address: | 3.2 | Contact Phone Number:    Work:      Mobile:      Email: |

|  |  |  |  |
| --- | --- | --- | --- |
|  | **PRIMARY EMERGENCY CONTACT** |  | **ALTERNATE EMERGENCY CONTACT** |
| 3.3 | Name of Person: |  | Name of Person: |
| 3.4 | Address: |  | Address: |
| 3.5 | Contact Phone Number:    Work:    Mobile: |  | Contact Phone Number:    Work:    Mobile: |

The above particulars are true in every respect, and I apply for the beacon to be included in Fiji Register of 406 MHz Emergency Radio Beacons (Civil Aviation).

|  |  |
| --- | --- |
| Name |  |
| Position | Signature: |
| Organisation | Date Click or tap to enter a date. |