



QUOTATION REQUEST

1. Personal Information

Name _____

Position _____

Company Name _____

Phone Numbers (*+ . Int. format*) _____

Fax Number (*+ . Int. format*) _____

E-mail Address _____

Mailing Address (*Including ZIP Code & Country*) _____

2. Service Information

Note: if more than one Inquiry is required, please use one set of QUOTATION REQUEST per airplane.

Aircraft Type _____

Aircraft Serial Number _____

Aircraft Registration (*JAA, FAA, JCAB, etc.*) _____

SELCAL (*If applicable*) _____

Estimated Date of Service *or* _____

Time Frame Delivery (*Specify*) _____

Departure Location (*ICAO/IATA Code if applicable*) _____

Delivery Location (*ICAO/IATA Code if applicable*) _____





3. Main Services Requested

- Aircraft Ferry Flight
- Aircraft Recovery, AOG
- Aircraft Technical Evaluation
- Aircraft Flight Acceptance

4. Services & Charges Requested *(If applicable)*

● DEPARTURE

- Airport Charges *(Excluding Accumulated Parking Fees)*
- Departure Handling

● EN-ROUTE

- Overflight Permits
- Overflight ATC Charges
- Flight Planning
- Flight Following
- Navigation Flight Kit *(En-route Charts + Destination & Alternate Charts)*

● INTERMEDIATE TECHNICAL STOP

- Handling Charges
- Landing Permits
- Landing & Parking Fees

● DESTINATION

- Landing Permits
- Landing Fees
- Arrival Handling Charges

5. FUEL Requested

- All Fuel Supply
- Approx. Fuel Quantity Presently On Board _____ Kgs.
- Specify for how long the Fuel has been left _____
- on board: _____
- _____





6. Aircraft Equipment Available *(Confirm if Aircraft Equipment is Available)*

- RVSM
- TCAS
- MNPS
- HF – Com *(if applicable)*
- 8.33 kHz – Com
- Air Stairs
- Door Slides
- Life Raft

7. Deferred MEL Items *(If applicable)*





8. Aircraft Items Unserviceable Beyond MEL *(Please Describe if applicable)*

LEVITAIR