



Stand and Handling Request Form

Aeroporto di Comiso "Pio La Torre" – LICB - CIY

Ed. 1 del 01.02.2014 Rev. 5

To: Comiso Airport Via Generale Vincenzo Magliocco s.n. - c/o Aeroporto di Comiso. 97013 COMISO (RG) - ITALY	Mobile: +39 338 7441161 FAX: +39 0932 962381 Email: traffic@soaco.it Freq.VHF: 131.425Mhz Charlie Fire Cat.: 7
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Applicant details			
Flight requested by			
Flight operated by			
Air Operator's Certificate Number		Expiry date	
Contact person			
Email			
Tel. OPS 24 hours / Fax			
Crew information (Name, Surname, Date of birth) and telephone number	CPT:	Tel.:	
	F/O:	Tel.:	
	F/A:	F/A:	
	F/A:	F/A:	

Aircraft details			
Aircraft type		Aircraft Registration	
MTOW (Kg)		Seats	Wing span length (m)

Flight arrival details							
ETA (UTC)/Date				From (ICAO/IATA)			
Number of pax in				Number of flight in			
Purpose of flight	Private		Commercial		Medical		Other
When 'other purpose of Flight' – state Reason:							
Pax information (Name, Surname, Date of birth)	1:			2:			
	3:			4:			
	5:			6:			

Flight departure details							
ETD (UTC)/Date				To (ICAO/IATA)			
Number of pax out				Number of flight out			
Purpose of flight	Private		Commercial		Medical		Other
When 'other purpose of Flight' – state Reason:							
Pax information (Name, Surname, Date of birth)	1:			2:			
	3:			4:			
	5:			6:			

Please fill out the further information. Tick services required.		
Ground power unit	<input type="checkbox"/>	Remarks:
Parking	<input type="checkbox"/>	Remarks:
Toilet Service	<input type="checkbox"/>	Remarks:



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Water	Remarks:
Cleaning interior A/C	Remarks:
De-icing	***** NOT AVAILABLE *****
Air starter	Remarks:
Stairs	Height:
WX./NOTAM	Remarks:
MVT/LDM	To addresses:
Catering	Type: Delivery time:
Rest Room	Remarks:
Hotel Accommodation	Remarks:
Transfer	Remarks:

Payment					
Payment is required on departure. A Proforma invoice will be issued. Invoice will be sent by post.					
Please specify the payment method	Cash payment		Credit card payment		Advanced payment
Invoice details					
Company Name					
Address					
City		State/Country		ZIP/Postal Code	
VAT Number/Tax Identification Number					

Fuelling: Only Nautilus Aviation S.p.A.
Mail: ciy.fuel@nautilusaviation.com; nautilus24@nautilusaviation.com Tel.: 0039 347 5635329

For more up to date information please consult Italian AIP and check NOTAM.

International movements require the following additional information:

Full name, Dates of Birth, Nationalities and Passport Numbers of all on board the aircraft.

Please use an additional sheet if necessary.

How to complete the PPR Form:

1. Fill out details in full on form above.
2. Contact Traffic Office (fax form or email through).
3. On receipt of these details, an **acknowledgement** will be issued by return fax or mail, **PPR not required**.

Date

Signature

Pursuant to Italian Legislative Decree no. 196 dated 30th June 2003 SO.A.CO. S.p.A. informs that the personal data submitted will be processed. Processing will be carried out, both with automated and non-automated means, for the sole purpose of providing and managing the " Stand and Handling Request Form". Please be reminded that provision of data is mandatory in order to access and avail of the above mentioned service. The collected data is disclosed to third parties only if this is necessary for the said purposes, or in order to comply with the law. With reference to the data supplied, data subjects are entitled to exercise the rights granted by art. 7 of Italian Legislative Decree no. 196 dated 30th June 2003. The data controller is SO.A.CO. S.p.A. with legal headquarters in Via Generale Vincenzo Magliocco s.n. - c/o Aeroporto di Comiso, 97013 COMISO (RG) - ITALY

Having read the Privacy Policy and understood the rights granted to data subjects by art. 7 of Italian Legislative Decree no. 196 dated 30th June 2003 with reference to personal data related to the Privacy Policy, I hereby authorize the processing of the data submitted uniquely for the above mentioned purposes.