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| **NOTAM PROMULGATION REQUEST FORM** |
| FAX: 64833044; Group EMAIL: CAAS-ATSATCSO-SATCC (internal); CAAS\_DNB@caas.gov.sg (external) Call NOTAM Officer at TEL: 65956053 after faxing or emailing form  |
| **To be completed by NOTAM Originator**  |
| Tick one of the boxes for the NOTAM Type |
|  **NOTAMN** (NEW) (for a New NOTAM) **NOTAMR** (REPLACE) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (indicate the NOTAM NR of the previous NOTAM which is to be replaced)  **NOTAMC** (CANCEL) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (indicate the NOTAM NR of the previous NOTAM which is to be cancelled) |
| **A)** | **FIR** or **AERODROME**The location of the activity | Circle the FIR or Aerodrome where the activity is taking place |
| **WSJC WIIF / WSJC / WSSS / WSSL / WSAP / WSAT / WSAG** |
| **B)** | **START DATE-TIME (UTC)**Indicate when activity begins in: Year/Month/Date/Hour/Minute  | **Y**  | **Y**  | **M**  | **M**  | **D**  | **D**  | **H**  | **H**  | **M**  | **M**  |  |
|  |  |  |  |  |  |  |  |  |  |
| **C)** | **END DATE-TIME (UTC)**Indicate when activity ends in: Year/Month/Date/Hour/Minute | **Y**  | **Y**  | **M**  | **M**  | **D**  | **D**  | **H**  | **H**  | **M**  | **M**  |  |
|  |  |  |  |  |  |  |  |  |  | **EST / PERM**(if applicable) |
| **D)** | **BREAK-UP IN TIMINGS** Fill this only if there is a breakin-between timings, example:SEP 24 0100-0200, 28 0500-0800  | Indicate specific active periods, in-between the start and end timings, if any.  |
|  |
| **E)** | **NOTAM TEXT**  | Free text. Use ICAO abbreviations. Coordinates format: 012530N1035635E |
|  |
| **F)**  | **LOWER HEIGHT** **LIMIT** (if any) | Circle or fill-in one of the appropriate Lower Height Limits | Remarks |
| **SFC** or **GND**  or **FL**\_\_\_\_\_\_\_\_\_ or \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**FT AMSL**  or \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**FT AGL**#\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**M AMSL** or \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**M AGL**# | # If AGL is selected, provide the terrain elevation in feet: \_\_\_\_\_\_\_\_\_\_\_\_\_FT |
| **G)**  | **UPPER HEIGHT****LIMIT**(if any) | Circle or fill-in one of the appropriate Upper Height Limits | Remarks |
| **UNL**  or **FL**\_\_\_\_\_\_\_\_ or \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**FT AMSL**  or \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**FT AGL**#\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**M AMSL** or \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**M AGL**# | # If AGL is selected, provide the terrain elevation in feet: \_\_\_\_\_\_\_\_\_\_\_\_\_FT |
| I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (name), confirm that the aeronautical data and information set out in this form complies with data quality specifications such as accuracy, resolution, integrity, traceability, timeliness, completeness and format on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (date) at \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(time)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Designation / Division of Originator Signature Contact NR (24 hours) |
| **To be completed by NOTAM Office** |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Name of NOTAM Officer / Date Name of NOTAM QC  |