

8 - NOTAM REQUEST FORM

A - CONTACT DETAILS							
Cont	act Person						
Title							
	act Telephone / email						
Contact Fax		Number of Pages (Including this page)					
B - NOTAM DETAILS							
NOTAM TYPE		New		Cancel		Replace	
Previous NOTAM Number for Cancel or Replace							
Α	Location						
В	Valid From Time			UTC/LOC	AL FOR		Dhhmm
С	Valid To Time			UTC/LOC	AL	MAT:YYMMD	חחחחט
D	Daily Schedule						
E	NOTAM Text						
F	Lower and Upper L	imit					
		I					
C ALITHODIZATION							
C - AUTHORIZATION I declare that the information in this NOTAM request is accurate and authorized for							
dissemination							
NAME							
SIGNATURE							
DATE							