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| D:\DGAC\Membretados\hojas membretadas\s\OPCIONES FINALES\internas\plantillas\encabezado.jpg | **REGISTRO/REGISTRATION** | | | | | | | | | | | | **CODIGO/CODE** | | | **VIGENCIA/VALIDITY** | | | |
| DTA/SIS-REG-002 | | | 19/12/2024 | | | |
| **SOLICITUD DE SOBREVUELO/OVERFLIGHT APPLICATION** | | | | | | | | | | | | **REVISION** | | | |
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| Fecha de solicitud:  Application date: | Clic para escribir/Click to fill | | | | | | | |  | | | | | | | | | | |
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| Señores/Sirs:  **DIRECCIÓN GENERAL DE AERONÁUTICA CIVIL**  Presente.- | | | | | | | | | |  | | |  | | |  | | | |
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| Mediante la presente solicitamos autorización para realizar Sobrevuelo por el espacio aéreo del Estado Plurinacional de Bolivia, de acuerdo a la siguiente información/ Through this form, we request authorization to overflight the airspace of the Plurinational State of Bolivia, according to the following information:: | | | | | | | | | | | | | | | | | | | |
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| **Datos del Explotador Aéreo/** **Air Operator information** | | | | | | | | | | | | | | | | | | | |
| Nombre o Razón Social del explotador aéreo/ Operator name | : | | Clic para escribir/Click to fill. | | | | | | | | | | | | | | | | |
| Dirección comercial, ciudad, país/ Commercial address, city, state, country | : | | Clic para escribir/Click to fill. | | | | | | | | | | | | | | | | |
| Teléfono/Telephone number | : | | Clic para escribir/Click to fill. | | | | | | | | | | | | | | | | |
| Correo electrónico/e-mail | : | | Clic para escribir/Click to fill. | | | | | | | | | | | | | | | | |
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| **Datos de la Persona o Empresa de Contacto-Solicitante/Contact-applicant information** | | | | | | | | | | | | | | | | | | | |
| Nombre completo/Full name | : | | Clic para escribir/Click to fill. | | | | | | | | | | | | | | | | |
| Teléfono/Telephone number | : | | Clic para escribir/Click to fill. | | | | | | | | | | | | | | | | |
| Correo electrónico/e-mail | : | | Clic para escribir/Click to fill. | | | | | | | | | | | | | | | | |
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| **Datos de la(s) Aeronave(s)/Aircraft(s) Information** |  | | Para más de 5 aeronaves, adjuntar lista con la siguiente información: Tipo/Versión/Matrícula/Peso MTOW  For more than 5 aircrafts, attach list with the following information:Type/Version/Registration/Weight/MTOW | | | | | | | | | | | | | | | | |
| Tipo(s), Modelo(s)/ Type (s), Model (s) | : | | Clic para escribir/Click to fill. | | | | | | | | | | | | | | | | |
| Autonomía máxima en horas de la(s) aeronave(s)/ Maximum Autonomy in hours of the aircraft(s) | : | | Clic para escribir/Click to fill. | | | | | | | | | | | | | | | | |
| Matrícula(s)/ Registration(s) | : | | Clic para escribir/Click to fill. | | | | | | | | | | | | | | | | |
| Nacionalidad(es)/ Origin Country | : | | Clic para escribir/Click to fill. | | | | | | | | | | | | | | | | |
| Peso (MTOW) de la(s) aeronave(s)/ Aicraft (s) Weight (MTOW)  (Unidades de medida según el documento de respaldo)/ (Units of measure according to the supporting document) | : | | Clic para escribir/Click to fill. | | | | | | | | | | | | | | | | |
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| **Datos de la Operación/** |  | |  | | | | **Operation Information** | | |  | | |  | | |  | | | |
| Fecha(s) estimada(s) del sobrevuelo (Horario UTC) /Overflight estimated date (UTC Time):  Del/from | : | | Elija una fecha/Choose one date. Al/To: Elija una fecha/Choose one date. | | | | | | | | | | | | | | | | |
| Ruta: Información por cada par de ciudades/Route: Information for each pair of cities  (Aeropuertos en Código OACI)/(Airports in ICAO Code) |  | | De/From: Clic para escribir/Click to fill. AWY: Clic para escribir/Click to fill.  A/To: Clic para escribir/Click to fill. EET: Clic para escribir/Click to fill.  Punto Ingreso a FIR SLLP/ Entry Point to FIR SLLP: Clic para escribir/Click to fill.  Punto Salida de FIR SLLP/ Exit Point to FIR SLLP: Clic para escribir/Click to fill. | | | | | | | | | | | | | | | | |
|  |  | |
| Objeto de Vuelo/Flight Object |  | : | | | Elija un elemento./Choose one option | | | | | | Detalle del objeto de vuelo/Flight Object Detail: | | | Clic para escribir/Click to fill. | | | | | |
| Observaciones/Remarks |  | : | | | Clic para escribir si es necesario/Click to fill it if necessary. | | | | | | | | | | | | | | |
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| ***LA INFORMACIÓN CONTENIDA EN ESTA SOLICITUD SE CONSTITUYE EN DECLARACIÓN JURADA/ THE INFORMATION CONTAINED IN THIS APPLICATION CONSTITUTES AN AFFIDAVIT***  ***NOTA:***   1. ***El trámite iniciará solamente cuando la DGAC verifique que la solicitud esté completa y debidamente llenada/ The process will begin only when the DGAC verifies that the application is complete and duly filled out.*** 2. ***El Incumplimiento en los pagos que genere Deudas Vencidas, es sujeto a la Suspensión Temporal o Definitiva de la Autorización, previa notificación por parte de esta AAC/ Failure To Make Payments That Generate Overdue Debts Is Subject To Temporary Or Permanent Suspension Of This Authorization After Prior Notification By This AAC.*** | | | | | | | | | | | | | | | | | | | |