

PRE-QUOTATION INFORMATION – HELICOPTERS

Company:
Position at Company:
Email:
Contact number:
End user of the helicopter:
AOC holder details:
Area of Operation Country:
Base airport or location: (ICAO/IATA)
Areas of operation:
Approximate altitude operating range:
ACMI (Helicopter, the full Crew, full Maintenance and specific Insurance):
DAMP (Helicopter, limited staff, some Maintenance and specific Insurance - Customer may provide some pilots, engineers or flight attendants): DRY (Helicopter only - Customer provides pilots, engineers and flight attendants):
Special Insurance Requirements:
Purpose of operation:
Will ammunition be transported?
Does the helicopter require armour plating?
Will the helicopter transport military personnel?

Name:

Centurion Aerospace Email to: info@centurionaero.com



Helicopter Required:

Maximum number of passengers per flight:

Maximum distance to be flown:

Maximum payload:

Type of work:

Preferred Type of Helicopter:

Special Equipment Requirement:

Other

Daily Operational Requirement:

Number of helicopters:

Number of days per week:

Guaranteed flight hours per month:

Maintenance Facilities:

Hangar: (If possible please list all services, incl: Air, Water, Gasses

Preferred Operational Standard: (EASA, FAA, ICAO)

Projected Start Date:

Estimated Completion Date:

Other Information:

Owner / Operator / Mandate?

Provide Mandate letter