

FLIGHT PLAN

PRIORITY

<<≡ FF →

ADDRESSEE(S)

 _____ <<≡

FILING TIME

____|____|____|____|____|____|

ORIGINATOR

____|____|____|____|____|____| <<≡

SPECIFIC IDENTIFICATION OF ADDRESSEE(S) AND/OR ORIGINATOR

3 MESSAGE TYPE

<<≡ (FPL

7 AIRCRAFT IDENTIFICATION

- H A E G F

8 FLIGHT RULES

- V

TYPE OF FLIGHT

G <<≡

9 NUMBER

-

TYPE OF AIRCRAFT

P A 3 1

WAKE TURBULENCE CAT

/ L

10 EQUIPMENT

- S Y / S <<≡

13 DEPARTURE AERODROME

- L H B P

TIME

0 7 3 0 <<≡

15 CRUISING SPEED

- N 0 1 5 0

LEVEL

A 0 1 5

ROUTE

→ MOLNAR

16 DESTINATION AERODROME

- L H T L

TOTAL EET
HR. MIN

0 0 1 0

ALTN AERODROME

→ L H B P

2ND ALTN AERODROME

→ _____ <<≡

18 OTHER INFORMATION

OPR/DMA LTD

SUPPLEMENTARY INFORMATION (NOT TO BE TRANSMITTED IN FPL MESSAGES)

19 ENDURANCE

HR MIN

- E / 0 2 3 0

PERSONS ON BOARD

→ P / 0 0 1

EMERGENCY RADIO

UHF

→ R / U

VHF

ELT

SURVIVAL
EQUIPMENT

→

POLAR

DESERT

MARITIME

JUNGLE

JACKETS

→

LIGHT

FLUORES

UHF

VHF

DINGHIES

NUMBER

→ / _____

CAPACITY

→ _____

COVER

→

COLOUR

→ _____ <<≡

AIRCRAFT COLOUR AND MARKINGS

A / YELLOW

REMARKS

→ / _____ <<≡

PILOT IN COMMAND

C / NAGY KAROLY) <<≡

FILED BY

SPACE RESERVED FOR ADDITIONAL REQUIREMENTS

KISS BELA

Please provide a telephone number so our operators can contact you if needed

TEL: + 36 1 234-5678