PHONE (242) 367-0525



FAX (242) 367-0526

BAHAMAS CUSTOMS DEPARTMENT

Form No. C7

AIRCRAFT GENERAL DECLARATION

(OUTWARD / INWARD)

Owner or Operator			
Marks of Nationality and Registration Flight No.		Date	
Departure form		Arrival at	
	(Place)		(Place)
		FLIGHT ROUTING	
	("Place" colum	n to list origin, every en-route stop and des	tination)
PLACE	CREW MEMBERS LIST	NUMBER OF PASSENGERS ON THIS STAGE	PASSANGER LIST
		Departure Place:	
		Embarking:	
		Through on same	
		flight	
		Arrival Place:	
		Disembarking	
		Through on same flight	
Declaration of Hea	lth		For official use only
	known to be suffering from illness or	ther then airsickness or the effects of	
	as those cases of illness disembarked dur		
Any other conditions on board which may lead to the spread of disease			
Details of each dis-	insecting or sanitary treatment (place, da	te time method) during the flight. If no	
Details of each disinsecting or sanitary treatment (place, date, time, method) during the flight. If no disinsecting has been carried out the flight, give details of most recent disinfecting.			
	Signatur	·	
L declare th	nat all statements and particulars contain	Crew members responsible ed in this General Declaration, and in any	supplementary forms required to be presented with
			ugh passengers will continue/have continued on the
		SIGNATURE	
Authorized Agent or Pilot-in-Command			