## TRANSPORT FORM

## applicable for airport security screening exemption of cryogenic containers containing SoHO materials

I. Transport Details			
a) Airport	Date		
b) Air carrier	Flight No		
c) Final destination			
d) Accredited medical un	it		
II. Identification Det	ails of the Accredited	Medical Entit	у
a) Name as listed in the I	EU Coding Platform		
b) Address			
c) Contact person			
d) Phone number/Email _			
III. Import/Export A	uthorization Details iss	sued by ANT	
a) Authorization No			
•			
c) Validity			
IV. Authorized Cour	rier Identification Detai	Is	
a) Full name			
b) Authorized courier ID			
c) Authorization number			
d) Contact number			
V. Identification Det	tails of the Cryogenic (	Container	
a) Manufacturer/Model _			
,	:/Series		_
,	·		
Authorised c	ourier:		
		Signature:	

Note: The completed form must be sent to the email address <a href="registratura@caa.ro">registratura@caa.ro</a> (Romanian Civil Aviation Authority) at least 3 working days prior to the date of air transport.