NPRM No: 2026-	**Title:** MCAR-Air Operations
Date of your Submission:	**Comment Close-Off Date (as specified in NPRM):**

Please return this response sheet to the Maldives Civil Aviation Authority by comment close-off date, by e-mail to safety@aviainfo.gov.mv, by post addressed to this Office, 02nd floor, Velaanaage, Ameerahmed Magu, Male', or by fax to + 960 3323039

Please indicate your acceptance or otherwise of the proposal by ticking the appropriate box below. Any additional constructive comments, suggested amendments or alternative action will be welcome and may be provided on this response sheet or by separate correspondence.

☐ The proposal is **acceptable without change.**

☐ The proposal is **acceptable but would be improved if the following changes were made:**

☐ The proposal is **not acceptable but would be acceptable if the following changes were made:** (Please provide explanatory comment and use additional pages if required)

☐ The proposal is **not acceptable under any circumstance:** (Explanatory comment must be provided using additional pages if required)

Individual's Details (complete if your submission is on behalf of yourself)		**Organisation's Details (if your submission is on behalf of the organization you represent)**	
Your Name:		Organisation:	
Address:		Address:	
Phone:	Fax:	Phone:	Fax:
E-mail:		E-mail:	
Mobile:		Your Name and Position:	
Signature:		Signature:	