

4 Wing Cold Lake – Prior Permission Request (PPR) PPR Number

Prior Permission Requests (PPR #) are required for all transient aircraft landing and requesting services at CFB Cold Lake. Lift messages vice PPRs are accepted if services are not required. PPRs and services are coordinated within 48 hours.

Medley Terminal and Transient Servicing are only available from 0600L - 1800L weekdays. Exception: Emergencies & 1 CAD lift messages.

Required documents for PPR processing are:

- Waiver of Indemnification Annex A (for civilian and non-NATO aircraft only)
- Lavatory & Water services Annex B
- If GRA passes are required, contact Marie.Dubas@forces.gc.ca. See Annex C for accepted Special Area passes.
- Dangerous cargo manifest if applicable

Email completed forms to 4WGCOC@forces.gc.ca. Combat Ops Centre contact information:

Phone:1-780-840-8595 **CSN**:(86) 690-8595 **DSN**: (319) 690-8595 **Email**: 4WGCOC@forces.gc.ca

Point of Contact info					
Organization/Unit					
Name:		Phone:			
Email:		A/C Cmdr and contact #			
Mailing Address:		Postal / Zip Code:			
		Country:			
Reason of Visit:					
Associated with Military Business:	Yes	Associated with City Business:	No		
Aircraft information					

Call Sign or Registration:

Number of Aircraft: Type of Aircraft:

Departing from (ICAO): ETA: (DD/MM/UTC)

Departing to (ICAO): ETD: (DD/MM/UTC)

Military pers. onboard: Civilian pers. onboard:

VIP onboard? No Title & Rank:

Dangerous cargo onboard? No If yes, Dangerous Cargo manifest including Class of Explosive

(Hazard Classification Code) & Net Explosive Quantity

Other pertinent information:

Service and equipment requirements (48 hrs notice required)

Customs	Fuel Services					
All hrs notice required for: Customs	Type Not Requir	red Amount required i	n lbs			
Customs Amount Power Cart Conveyor Belt Splitloader Spritling Splitloader Splitling Splitloader Spritling Splitloader Splitling Splitlin	Time Requested					
LOX in litres Amount Power Cart Conveyor Belt Spiritoader Spiritoa	48 hrs notice req	uired for:	Equipment			
Nitrogen cart Conveyor Belt Conveyor Belt Splitloader Nati-Icing 2 weeks notice preferred K Loader De-Icing Not Required Forklift Heat cart Complete Annex B Heat cart Cother Requests: Any other services need to be arranged through the hosting Squadron's LogO. Acknowledge the following: - 4 Wing reserves the right to cancel or revoke any PPRs or services. - Any service or equipment requests made after the MIN time requirements are subject to denial based on available resources. Printed Name (Rank, Last, First): Signature: Date (DD/MMM/YY): 4 Wing use only. Authorized: YES By: Date: Type: Parking: Fees	Customs		Stairs			
72 hrs notice required for: Anti-Icing 2 weeks notice preferred	LOX in litres	Amount	Power Cart			
Anti-Icing	Nitrogen cart		Conveyor Belt			
De-Icing Not Required Forklift Lavatory/Water Complete Annex B Heat cart Other Requests: Any other services need to be arranged through the hosting Squadron's LogO. Acknowledge the following: - 4 Wing reserves the right to cancel or revoke any PPRs or services Any service or equipment requests made after the MIN time requirements are subject to denial based on available resources. Printed Name (Rank, Last, First): Signature: Date (DD/MMM/YY): 4 Wing use only Authorized: YES By: Date: Type: Parking: Fees	72 hrs notice required for:		Splitloader			
Complete Annex B Heat cart Other Requests: Any other services need to be arranged through the hosting Squadron's LogO. Acknowledge the following: - 4 Wing reserves the right to cancel or revoke any PPRs or services. - Any service or equipment requests made after the MIN time requirements are subject to denial based on available resources. Printed Name (Rank, Last, First): Signature: Date (DD/MMM/YY): 4 Wing use only Authorized: YES By: Date: Type: Parking: Fees	Anti-Icing	2 weeks notice preferred	K Loader			
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Any service or equipment requests made after the MIN time requirements are subject to denial based on available resources. Printed Name (Rank, Last, First): Date (DD/MMM/YY): 4 Wing use only Authorized: YES By: Date: Type: Parking: Fees	Any other services need to be arranged through the hosting Squadron's LogO. Acknowledge the following:					
Signature: Date (DD/MMM/YY): 4 Wing use only Authorized: YES By: Date: Type: Parking: Fees	- Any service or equipment requests made after the MIN time requirements are subject to denial based on					
Authorized: YES By: Date: Type: Parking: Fees	Printed Name (Ra	nk, Last, First):				
Authorized: YES By: Date: Type: Parking: Fees	Signature:	gnature: Date (DD/MMM/YY):				
Authorized: YES By: Date: Type: Parking: Fees	4 Wing use only					
	Authorized: YES					
Amplying Info:	Type:	Parking:	Fees			
	Amplying Info:					

Annex A

(1136-1)

4 WING COLD LAKE - WAIVER AND INDEMNIFICATION

(To be completed for Civilian and Non-NATO aircraft only.)

IN CONSIDERATION of my being	ng permitted to park and/or operate aircraft
belonging to	
I,	agree not to make any claim against
Her Majesty The Queen in Right of Car	nada, or any Officer, Servant or Member of the Canadian
Forces, nor any employees of Her Maje	esty The Queen in Right of Canada for damage caused to
my property or injuries sustained by me	while the aircraft is present at 4 Wing Cold Lake.
I CERTIFY that the aircraft is pro	operly insured and registered.
I FURTHER AGREE to indemnif	fy and save harmless Her Majesty The Queen in Right of
Canada, all Officers, Servants, and Me	mbers of the Canadian Forces, and any employees of Her
Majesty The Queen in Right of Canada	from all manner of actions, causes of action, claims or
demands of whatsoever kind or nature	which shall or may hereafter arise for any damage to any
property, public or private, or injuries su	ustained to anyone else which I may cause or contribute
to in any degree howsoever caused wh	ile the aircraft is present at 4 Wing.
By signing this document I ACKI	NOWLEDGE that I have read, understood and agreed to
this Waiver and Indemnification.	
Dated at	this day of
Witness	Aircraft Owner or Person Responsible

Annex B



Lavatory & Water Service Request

Unit: Name: Rank: Local Time: Date of Service: Zulu Time: Parking Aircraft Type: ICAO: Location: Requested Services Comments Lavatory Water Refill **Finance Codes Purchase Requistion Cost Center Funds Center GSIN** G/L Account Additional comments Authorization CoC Name (Please Print) Date (mm/dd/yyyy) Signature **Annex C** PROTECTED A A C E 1 CANADIAN AIR DIVISION SPECIAL AREA PASSES **RECOGNIZED AT 4 WING** 12 WING SHEARWATER 14 WING GREENWOOD

ACCEPTED PASSES FOR ENTRY TO 4 WING COLD LAKE ALL OTHERS MUST REPORT TO PASS CONTROL PROTECTED A