

## **Customs in 3 Easy Steps**

### **Step 1 Obtain a Customs Decal**

Apply for a Customs decal for your aircraft if you don't have one already.

Apply online at CBP.Gov or:

<https://tradelinks4.mellon.com/cbp/Dispatcher>

### **Step 2 Obtain an overflight permit**

**Single Overflight Permit** for a specific, one time arrival.

Need a minimum of 15 days prior written notice mailed to the Port Director.

**Term Exemption Overflight Permit** for a 1 year term.

Need a minimum of 30 days prior written notice mailed to the Port Director.

(Please note: Customs has been able to process overflight permit requests within 24-48 hrs of receiving requests for arrivals into CRQ.)

Mail a letter to request the over-flight permit and explain why an overflight permit is beneficial to you, **AND** form **442** to:

**The Port Director**

**610 W Ash St**

**Suite 1005**

**San Diego, CA 92101**

**Attn: Overflight/Landing Rights**

**\*\*Please refer to our list of information that must be included in your overflight request.\*\***

### **Step 3 Give Advance Notice of Arrival**

Customs must be notified of your arrival at least 60 minutes in advance. You must call **AND** fax your Advance Notice of Arrival Form **178**.

Call CBP @ (619) 685-4304, 4305, 4306

**AND** fax form **178** to (619) 685-4396

**\*\*Please refer to our list of information that must be included in your advance notice of arrival.\*\***

# Step 1: Obtain a Customs Decal

Snapshot of website for ordering Decal:

Login

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DHS.gov














## Online Decal/Transponder Purchase

<p><b>Account Login</b> PASSWORD IS CASE SENSITIVE</p> <p>User Id: <input type="text"/></p> <p>Password: <input type="password"/></p> <hr/> <p><b>Password Change:</b> <i>To change your password, enter your User ID, Password, New Password and Retype your new Password. Then click the enter button.</i></p> <p>New Password: <input type="password"/></p> <p>Confirm New Password: <input type="password"/></p> <p><input type="button" value="Enter"/></p> <p><i>Forgot Your Password? Click Here</i></p> <p><i>Have General or Technical Questions?</i></p> <p><b>For Assistance, Please Contact Us</b></p> <p><i>By Phone (317)298-1245</i></p> <p><i>Or</i></p> <p><i>E-mail at <a href="mailto:Decals@DHS.GOV">Decals@DHS.GOV</a></i></p>	<p><i>Welcome to the Online Decal/Transponder Purchase Website! The official CBP Online resource for ordering decals and transponders.</i></p> <h3>First Time Users</h3> <p><a href="#">If you have received an Account Number in the mail, SIGN-UP HERE</a></p> <p><a href="#">If you have NOT received an Account Number in the mail, REGISTER HERE</a></p>  <p><b>Click the DHS Seal Above To Return to CBP.GOV</b></p>	<h3>Benefits Offered</h3> <p><i>Order decals and annual transponders online!</i></p> <p><i>Returning Users can maintain their accounts online</i></p> <p><i>Credit Card payments accepted</i></p> <p><i>Expedited Shipping Available</i></p> <h3>What's New?</h3> <p><i>User Fee Price Increase</i></p> <p><i>Click on the DHS seal to the left for more information</i></p>
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## Step 2: Obtain an overflight permit

All overflight exemptions must include:

-  Aircraft registration number and serial number
-  Identification information for each aircraft (class, manufacturer, type, number, color scheme and type of engine (e.g., turbojet, turbofan, etc.))
-  A statement that the aircraft is equipped with a functioning mode C (altitude reporting) Transponder, which will be in use during the overflight.
-  A statement that the overflight will be made in accord with the instrument flight rules (IFR), and that flights will be at altitudes above 12,500 feet mean sea level (Unless other instructed by ATC).
-  Name and address of the applicant operating the aircraft. If the applicant is an individual, include the name, address, social security number (if available), and date of birth. If the applicant is a business entity, the address of the headquarters of the business. If the aircraft is operated under a lease, include the name, address social security (if available) of both the lessee and the owner.
-  Individual, signed applications from each crewmember stating name, address, Social security numbers (If available), FAA certificate number (if applicable), and place and date of birth.
-  A statement from the individual signing the application that the pilot(s) and crewmember(s) responding to the paragraph above are those intended to conduct overflights, and to the best of the individual's knowledge, the information supplied is accurate.
-  Names, addresses, Social Security numbers (if available), and dates of birth for all usual or anticipated passengers. An approved passenger must be on board to utilize the overflight exemptions.
-  Description of unusual or anticipated baggage or cargo.
-  Description of the applicant's usual business activity.
-  Names(s) of the airport(s) of intended first landing in the U.S. Overflights will only be permitted to specific approved airports.
-  Foreign place(s) from which the flight(s) will originate.
-  Reasons for request for the overflight exemption. Provide an estimate of the increased costs of an extra landing at a designated airport (e.g., fuel, wear on aircraft components, landing fees, additional time/distance, etc.)

**APPLICATION FOR  
EXEMPTION FROM SPECIAL LANDING REQUIREMENTS (OVERFLIGHT)**

Please Print or Type

**CHECK ALL THAT APPLY:**

OVERFLIGHT:  TERM     SINGLE    DATE OF SINGLE (MM/DD/YYYY): \_\_\_\_\_  
 AMENDMENT     RENEWAL     NO CHANGE     DELETION

**CBP USE ONLY**

APPROVED \_\_\_\_\_  
DENIED \_\_\_\_\_  
DATE \_\_\_\_\_

**APPLICANT NAME AND ADDRESS**

<p>1. APPLICANT OR COMPANY NAME AND ADDRESS (Use Full Legal Name)</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>IRS NO. _____ SURETY NO. _____</p> <p>PHONE _____ FAX _____</p>	<p>2. NAME OF OPERATOR (IF LEASED OR DIFFERENT FROM #1) (Use Full Legal Name)</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>IRS NO. _____ SURETY NO. _____</p> <p>PHONE _____ FAX _____</p>
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**AIRCRAFT INFORMATION (if additional space is needed, provide attachments)**

3. Tail Number	4. Country of Registration	5. Serial Number	6. Make/Model/Series	7. Color Scheme	8. Current CBP Decal #

**INTENDED AIRPORT(S) OF USE - NAME & CODES (if additional space is needed, provide attachments)**

9. Arrival Airport(s) Name & City/State	10. Arrival Airport Code	11. Foreign Airport(s) Departure Name	12. Foreign Airport(s) Departure Code

**PILOT/CREW INFORMATION (if additional space is needed, provide attachments)**

13. Pilot/Crew Name & Address: (Use Full Legal Name)	14. DOB (mm/dd/yyyy)	15. SEX	16. Citizenship Place of Birth	17. Passport and /or Doc #	18. Social Security # (optional)	19. Pilot License #

**USUAL OR ANTICIPATED PASSENGERS (if additional space is needed, provide attachments)**

20. Name & Address: (Use Full Legal Name)	21. DOB (mm/dd/yyyy)	22. SEX	23. Citizenship Place of Birth	24. Passport and /or Doc #	25. Social Security # (optional)

**USUAL OR ANTICIPATED CARGO (if additional space is needed, provide attachments)**

26. List Usual Cargo or Baggage

**SIGNATURE AND STATEMENT OF OWNER/APPLICANT**

I hereby certify that all the information given on this application is true and complete, and I authorize U.S Customs and Border Protection to perform whatever checks are necessary to verify my eligibility for, and compliance with 19 CFR 122. I acknowledge that I have read the rules of this program and agree to abide by them. I understand that significant penalties may be incurred by my business and/or me personally for non-compliance.

To the best of your knowledge has anyone on this application ever been convicted of any Federal, State, Military or Foreign Crime or Offense other than Traffic Violations in this country or elsewhere? (Violations that occurred prior to a person's 16th birthday may be excluded).

YES, Attach Explanation       NO

This aircraft used with this Overflight Exemption (if approved) will be equipped with a Class "C" Transponder. The aircraft will be operated above 12,500 feet during normal flight conditions unless ordered to fly at a lower attitude by FAA flight controllers and IFR flight rules will apply when arriving from foreign ports. The U.S. Customs and Border Protection Port of first intended landing will be notified in advance (24 hours or other local arrangements). The aircraft must be available for inspection by CBP anytime. If the applicant has entered into a time-share or lease agreement with a particular aircraft, by signing below the applicant agrees to having full operational control of the aircraft and all passengers, cargo, and crew that are being transported.

27. Owner Signature/Applicant Signature	28. Date	29. Notary or CBP Officer's Signature (OVERFLIGHT)	30. Date

**Mail Application to:** U.S. Customs and Border Protection  
 Attn: Overflight Desk  
 69 Terminal B  
 Newark IAP  
 Newark, NJ 07114

This application must be renewed every **two (2) years** (bi-annual) for the "Term" Overflight program.

PAPERWORK REDUCTION ACT NOTICE: Paperwork Reduction Act says the information collected on this application is needed to carry out the Customs and Immigration laws of the United States. We need the information to insure that applicants meet the criteria established to participate in the U.S Customs and Border Protection Overflight Exemption as per 19 CFR 122.25. The information collected will be stored in a computer database for tracking purposes. Your response is required to obtain the benefits of participation in the program. Statement required by 5 CFR 1320.21: The estimated average burden associated with collection of information is 3 minutes per respondent or recordkeeper depending on individual circumstances. Comments concerning the accuracy of this burden estimate and suggestions for reducing this burden should be directed to U.S. Customs and Border Protection, Information Services Branch, Washington, DC 20229 and to the Office of Management and Budget, Paperwork Reduction Project (1651-0087) Washington, DC 20503.








#### PRIVACY ACT NOTICE

We are required by the Privacy Act to provide you with the following information: The authority for requesting the information is 5 USC 301 Treasury Department Order #165 revised as amended. Providing the information is mandatory for Private Aircraft Operators/ Passengers to participate in the CBP Overflight Program. The information or data may be given to federal, state or local law enforcement agency when CBP becomes aware of violations or possible violations of civil or criminal law; to a federal agency when conducting an investigation for security reasons, or to a court. If data or information is not provided, applicant(s) will not be approved to participate in the program.

**CBP Form 442 (09/02)**

### **Step 3: Give Advance Notice of Arrival**

Advance Notice of Arrival must include:

-  Type of aircraft and registration number
-  Name of aircraft commander
-  Fix Base Operator (FBO) and callback telephone #
-  Number of U.S. citizens passengers, names, Dates of Birth, and Nationality
-  Number of alien passengers, names, Dates of Birth, and nationality
-  Place of last foreign departure
-  Estimated time and location of crossing U.S. Border/coastline

**This information needs to be included when faxing CBP form 178 at least 60 min prior to arrival.**

DEPARTMENT OF HOMELAND SECURITY  
U.S. Customs and Border Protection

**PRIVATE AIRCRAFT ENFORCEMENT SYSTEM ARRIVAL REPORT**

Handbook 3000-05

**ARRIVAL INFORMATION**

<b>PART I</b>	U.S. Airport of Arrival:		Arrival Time: Zulu:                      Local:		Date of Arrival:
	Foreign Airport of Departure:		Departure Time: Zulu:                      Local:		Date of Departure:
	Direct flight or was other foreign itinerary involved?				

**AIRCRAFT INFORMATION**

<b>PART II</b>	Aircraft Tail No.:		Decal No.:			
	Make:	Model:	Colors:	Trim:		
	Aircraft Owner/Lessee Name:		Street Address:			
	City:	State:	Country:	Zip:		

**PILOT INFORMATION**

<b>PART III</b>	Full Legal Name:		Street Address:		
	Date of Birth:	Nationality:	City:	State:	
	Pilot License Number:		Country:	Zip:	

**CREW and PASSENGER INFORMATION**

<b>PART IV</b>	Crew or Passenger	<b>Use reverse side for more crew or passengers</b>	Full Legal Name (Last/First)	Date of Birth (mm/dd/yyyy)	Nationality	
	<input type="checkbox"/> C or <input type="checkbox"/> P					
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<b>PART V</b>	Inspectors Name:		Badge #	PAES Report #
	Compliance Exam: <input type="checkbox"/> Yes <input type="checkbox"/> No	Results:	ECAR #	Overflight: <input type="checkbox"/> Yes <input type="checkbox"/> No