

alphaland

AVIATION, INC.

BAGGAGE CHECKLIST

NAME OF PASSENGER: _____

DATE / TIME OF FLIGHT: _____

NO. OF ACCOMPANYING MEMBERS OF THE FAMILY: _____

BAGGAGE COUNT AND WEIGHT <i>(All Persons and Baggages are subject for search at any time)</i>				
BAGGAGE		PIECES	WEIGHT	EXCESS <i>(if any)</i>
<i>(to be filled up by an authorized A.A.I. baggage personnel)</i>				
1	Handcarried <i>(05 kgs. / 11 lbs.)</i>			
2	Checked-in <i>(10 kgs. / 22 lbs.)</i>			
TOTAL				

BAGGAGE SECURITY QUESTIONNAIRE <i>(Please tick the box)</i>		YES	NO
1	Is / are the baggage/s checked-in your (family's) property?	<input type="checkbox"/>	<input type="checkbox"/>
2	Did you or your family packed the said baggage/s yourself/ves?	<input type="checkbox"/>	<input type="checkbox"/>
3	Can you / your family confirm that after packing, nothing was introduced in them?	<input type="checkbox"/>	<input type="checkbox"/>
4	Are you / your family fully aware of the contents this baggage/s?	<input type="checkbox"/>	<input type="checkbox"/>
5	Are you certain that your baggage/s does not contain any dangerous goods? (kindly see attached dangerous goods provisions for reference.)	<input type="checkbox"/>	<input type="checkbox"/>

I, the undersigned, do hereby acknowledge that I have read, understood and accept all the entries and stipulations stated in this form.

 Signature over printed name
(to be signed before an A.A.I. baggage check-in supervisor)