Handling company:	NG CHARGE NOTE  Nº
Airport: Type of aircraft:	Aircraft registration: Flight No
Arrival: Date/Local time:	Departure: Date/Local time:
Schedule:/	Schedule:/
Actual:/	Actual:/
Carrier:	Payer: (Company name)
Address:	Address:
e.mail:	e.mail:
Form of payment:	
The Handling company provide ground handling services at theInternational Airport in accordance with the technological sheet of the Form "D".  I hereby certify, as authorized representative of the Carrier, that I recognize and accept the liability conditions of the IATA Standard Ground Handling Agreement, (as stated in full on the reverse) for the performance of the services requested by the Carrier.  Confirmation for acceptance of conditions and for receipt of services in accordance with the technological sheet of the Form "D" and Act of the Form "C".	
For and on behalf of the Handling company:	For and on behalf of the Carrier:
Name:	Name:
Date:	Date:
Signature:	Signature:
Copies' Distribution: Carrier's Representative, Handling company.	