

TEL: (84 - 24) 3 8 274 191
FAX: (84 - 24) 3 8 274 194
AFS: VVVVYAAN
E-mail: and@caa.gov.vn
Website: caa.gov.vn

CIVIL AVIATION AUTHORITY OF VIET NAM
AIR NAVIGATION DEPARTMENT
119 NGUYEN SON
BO DE WARD
HA NOI, VIET NAM

ORDER FORM FOR ACCOUNT TO ACCESS VIET NAM AIS WEBSITE

Order No:	Order date:
------------------	--------------------

This **Order Form** covers ordering account access to the Viet Nam AIS Website (aim.vatm.vn).

Please mail, e-mail, or fax this signed form to:

Postal address: AIP Division
Viet Nam Aeronautical Information Centre (VNAIC)
Viet Nam Air Traffic Management Corporation (VATM)
Building B, No. 5, Lane 200, Nguyen Son Str., Bo De Ward,
Ha Noi, 10 000, Viet Nam

Tel: (84 - 24) 38 728 521
Fax: (84 - 24) 38 725 687
E-mail: aip_vatm@vatm.vn; aip@vnaic.vn
Website: aim.vatm.vn

After 30 days of issuing this form, if no subscription is received, it is understandable that our publications are no longer in your need.

After receipt of this signed form, a Quotation indicating the amount due will be e-mailed. The payment can be made by either wire transfer to the bank account or direct payment in Viet Nam Dong (VND).

In case wire transfer to a bank account, the beneficiary shall bear only the fees charged by his bank, any other bank fees shall be borne by the payer.

After receiving the total payment, the account information and the VAT Invoice will be sent to the customer via email.

Moreover, whenever new publications are uploaded on the website, the customer will receive notice via e-mail.

SUBSCRIPTION ORDER:

Publications	Number of account(s) to be requested	Remarks
Viet Nam AIP in electronic version		<i>Apply to every customer who require purchasing Viet Nam publications on electronic version.</i> With this order, the customer shall receive: + 1 account to access Viet Nam AIS Website (aim.vatm.vn) (The account shall be activated after the payment is completed until 31 st Dec)

BILLING ADDRESS (address written on the VAT Invoice):

Company:
Address:
Tax code (VAT No.):

CONTACT INFORMATION:

Company:	
Tel:	Fax:
E-mail:	
Contact person:	

Signature of the legal representative: