Telecommunications Facility Annual Information Report				
Ghana Civil Aviation Authority A. Structure Owner Information				
1. Structure Owner:				
2. Address:				
3. Phone No:		4. Email:		
5. Contact Person:				
B. Structure Information				
1. Total height above ground (Please note units clearly):				
2. Details of current occupancy				
(i). Number of Operators:				
(ii). Names of Operators:				
3 . Lighting condition:	□ Serviceable		Unserviceable	
4. Lighting in compliance with GCAA requirement:	∃Yes		🗆 No	
5. State of Marking:	□ Good	🗆 Fair	□ Poor	□ Unmarked
6. Remarks				
C. Site Information				
1. Town & Surburb Names:				
2. Location Coordinates:				
3. Operator Site ID/Name :				
4. GCAA Permit Number:				
5. Remarks:				
D. Certification				
I hereby certify that all of the above statements made by me are true and complete to the best of my knowledge.				
Name, title (and address if different than above) of person this notice:	filing Signa	ature (in ink)		
	Date	of Signature	Telephone No. (F	Precede with area code
Inspection Authority				
Owners of structures shall allow GCAA safety inspectors to inspect their site (s) to verify compliance with the applicable parts of the Ghana Civil Aviation Directives, including unannounced inspections for the purpose of ensuring the safety of air navigation.				