

Oxygen Cylinder Check Form

AIR JAPAN

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Cylinder Requirement for Carry-on or Checked Baggage	①Cylinder must not exceed 5kg gross weight ②Cylinder must be Medical Oxygen Cylinder filled with oxygen or air. ③Cylinder must be within validity period ④ Cylinder must be 70cm or less in length and 10cm or less in diameter.					
Passenger Name	Name :					
Flight number Date of boarding	[Outbound] Flight NO	DATE :				
Product Name / Size	[Inbound] Flight NO : DATE :					
Product Name / Size	Product Name : Weight : kg *For carry on must be 5kg or less due to Civil Aeronautic Law in Japan Length cm x Length cm *Sum of 3 sides must be 203 cm for check in					
How to store inside cabin	<ul style="list-style-type: none"> • Cylinder must be stowed under the passenger seat • Any cylinder that cannot be stowed under the passenger seat must be tied-down in an adjacent seat, for which you will be charged. 					
Number of cylinders	[Outbound] Carry-on	+	Checked	=	Total	pc
Check list for the cylinders	< Choose Either > <Cylinder Number> <Date of next inspection>					
	Outbound	Inbound	Checked DATE			
	Outbound	Inbound	Checked DATE			
	It is an approved cylinder and labeled X It is gaseous oxygen for medical purposes only, labeled "O2." It must have passed a stress test within the last 3 years (5 years for some cylinders). Container made of fiberglass (Fiber Reinforced Plastics) must not lapsed 15 years after manufacturing.					
Name registrant	Date			Company name		
	Name			Telephone		

Necessary Arrangement Request

[To be completed by the passenger]

Passenger

Name				Age	
				Gender	
Phone Number (Mobile Phone)		Email address			
Itinerary	Departure Date :	Flight number: NQ	from	to	
	Departure Date :	Flight number : NQ	from	to	

Escort

Name	Physician	Nurce	Others()	
Name	Physician	Nurce	Others()	
1	1 Do you need wheelchair at the airport? No Yes → Category: Requires assistance to/from the cabin seat. (WCHC) Cannot ascend/descend steps, but able to walk in the cabin. (WCHS) Can ascend/descend steps, but requires wheelchair for walking long distance. (WCHR)			
2	Are you travelling with your own wheelchair? No Yes → Wheelchair Size: Weight : kg Width(W) : cm Depth(D) : cm Height(H) : cm Wheelchair Type: Manual Collapsible Non-Collapsible *Is the battery Removable? Yes No Electric/Battery-powered Lithium-ion Battery Dry Battery (NiCad, Ni-MH) Wet Battery (Gel, Silicon) Non-Spillable Battery Spillable Battery			
3	Do you use electric medical device in flight? (POC etc.) No Yes → If "Yes", please inform Contact Center of the details of the electric medical device in advance in order to confirm whether it can be used in flight.			

Agreement

I hereby authorize _____ (Name of nominated attending physician) to provide the airlines with the information required by those airline's medical department for the purpose of determining my fitness for carriage by air and in consideration thereof, I hereby relieve that physician of his/her professional duty of confidentiality in respect of such information and agree to meet such physician's fees in connection therewith.

Date _____

Passengers signature:

(or a Representative)