

# Cyprus Flight Pass Request

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Apply for your **CyprusFlightPass** within 24 hours before the commencement of your travel from the Country of Origin to the Republic of Cyprus (either direct flight or via intermediate Countries).

The categorization of countries and any change in their classification may be reviewed in the CyprusFlightPass online platform at the link <https://cyprusflightpass.gov.cy/en/country-categories>.

It is recommended that you regularly visit this online platform for possible changes in the categorization of countries that may affect your flight to the Republic of Cyprus.

The submission of this application and the granting of CyprusFlightPass does not affect the application of the provisions of any other Law of the Republic of Cyprus, which explicitly regulate issues of entry into the Republic of Cyprus.

**!** Please use only latin characters

## Passenger Information

Last (Family) Name

ФАМИЛИЯ

First (Given) Name

ИМЯ

Middle Initial (if any)

ID / Passport No

СЕРИЯ И НОМЕР ЗАГРАНПАСПОРТА

Nationality

ГРАЖДАНСТВО

Date of Birth

ДАТА РОЖДЕНИЯ

Country of Birth

СТРАНА РОЖДЕНИЯ

Gender

FEMALE

Пол:  
male - муж.  
female - жен.

## Contact Details

Where you can be reached if needed (Include country code and city code)

Mobile (eg. 0035799XXXXX for Cyprus phone)

+7 - КОД ОПЕРАТОРА - 000 00 00

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Other (if any)

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E-mail Address

ЭЛЕКТРОННЫЙ АДРЕС, УКАЗАННЫЙ ПРИ РЕГИСТРАЦИИ

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## Flight Information

Please select the relevant box, depending the kind of your travel to the Republic of Cyprus

- Direct Flight to the Republic of Cyprus
- Travelling to the Republic of Cyprus via intermediate Countries without an overnight stay(s)
- Travelling to the Republic of Cyprus via intermediate Countries with an overnight stay(s)
- Travelling via the Republic of Cyprus, as transfer or transit passenger, to other Countries

### Direct Flight Details (to the Republic of Cyprus)

Departure Date & Time (Country of Departure)

03-04-2021 17:46

Airline Name

Rossiya

Выбрать а/к, которой Вы летите



Flight Number

ВЫБРАТЬ НОМЕР РЕЙСА, КОТОРЫМ ВЫ ЛЕТИТЕ



Country of Departure

RUSSIAN FEDERATION

Please select this box if your flight is private.

Seat Number (if available)

Airport of Arrival

LARNAKA (LCA)

Departure date from Cyprus (if available)

Дата обратного вылета

If departure date from Cyprus is not available, please state the length of your intended stay in Cyprus

Less than 12 months

12 months or more

Заполняется, если дата обратного вылета неизвестна

I have not stayed/lived in countries with less favourable epidemiological criteria (Grey (Special Permission) Category) compared to the country of departure, within the past 14 days before my travel to the Republic of Cyprus, as per relevant [country categorization](#) announcement of the Republic of Cyprus.

## Passengers who meet the requirements for only one test in the Republic of Cyprus

Note: This section should be completed by passengers belonging to the following categories of passengers who have the option to perform ONLY one laboratory testing upon their arrival in the Republic of Cyprus, and they have chosen to use this option.

If you belong to at least one of the following Passenger Categories, who have been granted the option of having the COVID-19 test performed ONLY upon your entry to the Republic of Cyprus, paying personally the cost of the laboratory test for COVID-19 and you have decided to use this option, please tick the relevant box:

- Cypriot citizens and their family members (foreign spouses and their minor children)
- Persons legally residing in the Republic of Cyprus
- Persons allowed to enter in the Republic of Cyprus under the Vienna Convention.

I solemnly declare that I am aware of my obligations, as described below and the consequences of the Law in the event of my non-compliance, in case I have chosen to undergo laboratory testing ONLY upon my arrival in the Republic of Cyprus:

I am aware and accept that I will personally pay for the cost of the Covid-19 laboratory test, in case I have chosen to perform the Covid-19 laboratory test, only upon my entry into the Republic of Cyprus.

I am aware and accept that, in case I have chosen to conduct only one laboratory test, upon my arrival in the Republic of Cyprus, I must remain in a state of compulsory self-isolation, for 72 hours following my arrival and I must repeat a molecular test RT-PCR for COVID-19, upon completion of the 72 hours, at my own expense, and I will send the result of my laboratory test to the email address [monada@mphs.moh.gov.cy](mailto:monada@mphs.moh.gov.cy).

I am aware and I accept that the self-isolation will be terminated, provided that I will repeat a molecular test RT-PCR, 72 hours following my arrival and the result of the repeated laboratory test RT-PCR is negative.

I accept above solemn declarations

## COVID-19 test information

Have you conducted a test confirming negative PCR for COVID-19 during the last 72 hours before departure and do you possess a valid certificate?

- YES       NO

A valid certificate is a negative RT-PCR certificate from a certified laboratory. The sampling for the COVID-19 test is required to be conducted during the last 72 hours before departure.

Time and date you provided your sample for the test

02-04-2021 17:11:16

Дата и время сдачи биоматериала для ПЦР-теста

Type of Test

MOLECULAR METHOD (RT-PCR) **Всегда должно быть так**

Please note that antigen or antibody tests are not accepted

- Test result is NEGATIVE **Поставить галочку, если тест отрицательный**

## Second Laboratory Test Solemn Declaration

I am aware and accept that I must undergo a second laboratory test and I will personally pay for the cost of this COVID-19 laboratory test upon my entry into the Republic of Cyprus.

I accept the above solemn declaration

Для граждан, вылетающих из Красной категории

**Note 1:** Passengers arriving in the Republic of Cyprus from Red Category countries, having performed two laboratory tests, i.e. one laboratory test with sampling carried out 72 hours before their departure and one laboratory test upon their entry in the Republic of Cyprus, will not remain in a state of self-isolation or mandatory isolation (quarantine), if the results of both laboratory tests are negative.

**Note 2:** If you belong to the above categories of passengers who have the option to perform ONLY one laboratory test upon their arrival in the Republic of Cyprus and you have selected this option, please do not fill in the above covid-19 test information and do not accept the above solemn declaration. It is understood that in such a case, i.e. if you choose to perform only one laboratory test, upon your arrival to the Republic of Cyprus, you will remain in a state of compulsory self-isolation or mandatory isolation quarantine, as described below.

## Purpose of Travel

Are you a permanent resident of Cyprus returning from a trip abroad?

- YES
- NO

Please state the purpose of your visit in Cyprus

- Holidays
- Business
- Visiting friends & relatives
- Settlement in Cyprus for one year or more
- Other

## Permanent Address

Number and Street

Улица проживания

City

Город проживания

Country

RUSSIAN FEDERATION

Apartment Number (if available)

State / Province

ZIP / Postal Code

Индекс места проживания

## Temporary/Permanent Address in the Republic of Cyprus

SAME AS ABOVE

Hotel Name (if any)

Название отеля

Number and Street

Улица

Apartment Number (if available)

City

Город

ZIP / Postal Code

Индекс

District

## Emergency Contact Information

Of someone who can reach you during the next 30 days **(Include country code and city code)**

Last (Family) Name

Фамилия контактного лица

First (Given) Name

Имя контактного лица

Mobile (eg. 0035799XXXXXX for Cyprus phone)

+791611111111 (Номер тел. контактного лица, всегда с +7)

Other (if any)

E-mail Address (if any)

Country

RUSSIAN FEDERATION

City

Moscow

## Solemn Declarations

- I consent for possible COVID-19 sample testing, if requested, upon arrival to the Republic of Cyprus (Persons allowed to enter in the Republic of Cyprus under the Vienna Convention of 1961 and 1963 are exempted).
- I am fully aware of the risks, dangers and hazards connected to my flight and stay in the Republic of Cyprus, due to the COVID-19 pandemic. I assume and accept full responsibility for any risks of loss, harm, property damage or personal injury or death and I agree not to make claim and take proceedings against any person and/or any kind of businesses and/or authorized officers and /or the authorities of the Republic of Cyprus from any loss, liability, damages or costs that I may sustained and/or costs that I may incurred during my travel and stay to the Republic of Cyprus, as a result to COVID-19 and/or for any inconvenience I and/or they will be suffered, due to any precautionary measures applied during my trip and my stay in the Republic of Cyprus, for the purposes of protection of public health against COVID-19. This waiver of Liability, shall be binding to my family members and spouse and my heirs, assigns and personal representative, executors and successors.
- Following my return to my country of permanent residence, or to the country to which I return following the completion of my trip to the Republic of Cyprus, I shall inform the Medical Services of the Republic of Cyprus in the case I have developed symptoms of COVID-19, within 14 days following my departure from the Republic of Cyprus (e-mail address for correspondence [monada@mphs.moh.gov.cy](mailto:monada@mphs.moh.gov.cy)).
- I have not experienced one of the following symptoms – fever, cough, fatigue, headache, muscle or body aches, loss of taste or smell, shortness of breath or difficulty breathing, sore throat, congestion or runny nose, within the last 14 days or I have not been in close contact with a COVID-19 confirmed case.
- I declare subject to sanctions under the laws of the Republic of Cyprus that the facts and information I have provided, are complete, correct and true.

SAVE AS DRAFT

SUBMIT

Шаг 1: Сохранить. Можно будет внести изменения

Шаг 2: Submit, когда все графы заполнены

## Flight Information

### Direct Flight to the Republic of Cyprus

Country of Departure / Departure Date & Time

**Russian Federation / 03-04-2021 17:46**

Airline Name

**Rossiya**

Flight Number / Registration Number (Private Flights)

НОМЕР РЕЙСА, КОТОРЫМ ВЫ ЛЕТИТЕ

Airport of Arrival

**LARNAKA (LCA)**

## Passenger Information

Fullscreen

ИМЯ ФАМИЛИЯ

ID / Passport No

СЕРИЯ И НОМЕР ЗАГРАНПАСПОРТА

Nationality (Country)

ГРАЖДАНСТВО

Passenger Type

**Not in exception list**

COVID-19 Test

Type of Test: **RT-PCR**

Time and date you provided your sample for the test: **02-04-2021 17:11**

Is Negative? **YES**

[ATTACH COVID-19 TEST](#)

Загрузить ПЦР-тест

You can add passengers to your flight, once you complete the REQUEST for your CyprusFlightPass

Request my **CyprusFlightPass**

[REQUEST](#)

Нажать для формирования PDF-файла