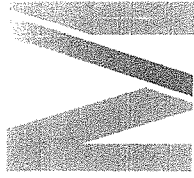




MANIFEST
ICAO ANNEX 9 APPENDIX 3

FLIGHT NO.	: PC 1020	2OCT2024	12:35	PAGE : 1/1
AIRCRAFT REG. NO.	: TCRBZ			
POINT OF LADING	: MUC	POINT OF UNLADING: SAW		
CARRIER	: Pegasus	security checked		

AWB	PCS/TTL	NATURE OF GOODS	WGT/KG	ORIG	DEST	CI	SPLs	REMARKS
BULK								
624 51885536	1/1	HUMAN REMAINS	120,0	MUC	ASR	X	HUM, SPX	
624 51951465	1/1	Civil aircraft spare parts	1,7	MUC	SAW	X	EAP	
624 51958874	5/5	PERSONAL EEFECT	102,0	MUC	AUH	X	SPX	
TOTAL BULK	7		223,7					
TOTAL	7		223,7					



SPECIAL LOAD - NOTIFICATION TO CAPTAIN

Station of Loading	Flight Number	Date	Aircraft Registration	Prepared by	Remark
MUC	PC 1020	02OCT2024	TCRBZ	Thies	

DANGEROUS GOODS

Station of Unload	Air Waybill Number	Proper Shipping Name	Class or Div. (Sub Risk)	UN/ID Nr	Erg Code	Nbr. of Pkge	Net Qty or Tl per Pkge	RAD Cat.	PG	IMP Code	CAO [X]	ULD/ID-No.	POS
-------------------	--------------------	----------------------	--------------------------	----------	----------	--------------	------------------------	----------	----	----------	---------	------------	-----

There is no evidence that any damaged or leaking packages containing dangerous goods have been loaded on the aircraft

OTHER SPECIAL LOAD

Station of Unload	Air Waybill Number	Contents and Description	Nbr. of Pkge	Net Qty per Pkge	Supplementary Information	IMP Code	ULD/ID-No.	POS
SAW	624 51885536	HUMAN REMAINS	1	120.0 Kg		HUM	BULK	

Captain's Signature:

	LOADING CERTIFICATION I certify that these articles have been loaded in accordance with all regulations and that there is no evidence of leaking or damaged packages. (to be signed by Loadcontroller) Loading Supervisor's name and signature	ACCEPTANCE CERTIFICATION I hereby certify that the above shipments have been checked and are in conformity with the current regulations. (to be signed by Handling Agent) Building Supervisor's name and signature
--	--	--

624 MUC 5188 5536

624 - 5188 5536

Shipper's Name and Address HUZUR INTERNATIONALE BESTATTUNGEN FREISINGER STRASSE 46 85399 HALLBERGMOOS GERMANY		Shipper's account Number 591794		Not negotiable Air Waybill Issued by		PEGASUS HAVA TASIMACILIGI ANONIM SIRKETI AEROPARK YENISEHIR MAH. OSMANLI BULVARI NO:11/A 34912 - KURTKEOY ISTANBUL		
Consignee's Name and Address MERMERLER CENAZE KAYSERI TUERKIYE		Consignee's account Number 777587		Copies 1,2 and 3 of the Air Waybill are originals and have the same validity. It is agreed that the goods described herein are accepted in apparent good order and condition (except as noted) for carriage. SUBJECT TO THE CONDITIONS OF CONTRACT ON THE REVERSE HEREOF. ALL GOODS MAY BE CARRIED BY ANY OTHER MEANS INCLUDING ROAD OR ANY OTHER CARRIER UNLESS SPECIFIC CONTRARY INSTRUCTIONS ARE GIVEN HEREON BY THE SHIPPER, AND SHIPPER AGREES THAT THE SHIPMENT MAY BE CARRIED VIA INTERMEDIATE STOPPING PLACES WHICH THE CARRIER DEEMS APPROPRIATE. THE SHIPPER'S ATTENTION IS DRAWN TO THE NOTICE CONCERNING CARRIER'S LIMITATION OF LIABILITY. Shipper may increase such limitation of liability by declaring a higher value for carriage and paying a supplemental charge if required.				
Issuing Carrier's Agent Name and City A.HARTRODT DEUTSCHLAND (GMBH & CO) KG, SUEDEALLEE/CARGO TERMINAL,MODUL F,5. ST., D-85356 MUENCHEN AIRPORT				Accounting Information				
Agent's IATA Code 23-4-7030/8013		Account No.						
Airport of Departure (Addr. of first Carrier) and requested Routing MUNICH				Reference Number		Optional Shipping Information		
To SAW	By first Carrier PEGASUS	Routing and Destination	To ASR	By PC	To	By		
Currency EUR	CHGS	WT/VAL P	Other P	Declared Value for Carriage N V D		Declared Value for Customs N C V		
Airport of Destination KAYSERI		Requested Flight/Date PC1020/02 PC2740/02		Amount for Insurance N I L		INSURANCE - If carrier offers insurance and such insurance is requested in accordance with conditions on reverse hereof, indicate amount to be insured in figures in box marked amount of insurance.		
Handling Information *** TOP URGENT *** TOP URGENT *** TOP URGENT *** 1 COFFIN MARKED AND LABELED *** ARRIVAL: 02.10.2024 / 21:45 H ***				UNSECURED				
				SCI - X -				
No. of Pieces RCP	Gross Weight kg	Rate Class lb	Commodity Item No.	Chargeable Weight	Rate	Charge	Total	Nature and Quantity of Goods (incl. Dimensions or Volume)
1	120.0	k M		120.0	520.00		520.00	THE HUMAN REMAINS OF LATE ADEM KOCA
1*	190 x 55 x 45	CMS						
1	120,0	k					520,00	
Prepaid		Weight Charge		Collect		Other Charges		
520,00						HUM FEE		40,00 C
Valuation Charge								
Tax								
Total other Charges Due Agent								
Total other Charges Due Carrier								
40,00								
Total Prepaid		Total Collect						
560,00								
Currency Conversion Rates		cc charges in Dest. Currency						
For Carrier's Use only at Destination		Charges at Destination		Total collect Charges				
						307-24-16747-307874		624 - 5188 5536

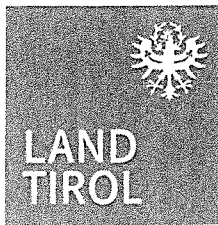
Shipped on (date) 01.10.2024 13:36:42 MUNCHEN at (place)

Signature of Shipper or his Agent
a.hartrodt Deutschland (GmbH & Co) KG
Andreas Buchl

Signature of Issuing Carrier or its Agent
a.hartrodt Deutschland (GmbH & Co) KG
as agent for the carrier
01.10.2024 13:36:42 MUNCHEN
Andreas Buchl

CARGOSCREENER
DE/RA/01291-01
0.47 cbm
02. Okt. 2024
SPX by K: X-RY : PHS : EDD
ETD : VCK

ORIGINAL 1 (FOR ISSUING CARRIER)



Bezirkshauptmannschaft Innsbruck
Gesundheit und Soziales

BH Innsbruck, Gilmstraße 2, 6020 Innsbruck, Österreich

Dr. Anke Luger
Gilmstraße 2
6020 Innsbruck
+43 512 5344 5193
bh.innsbruck@tirol.gv.at
www.tirol.gv.at

Informationen zum rechtswirksamen Einbringen und
Datenschutz unter www.tirol.gv.at/information

Geschäftszahl – beim Antworten bitte angeben
ISGA159157/AAG/1-2024
Innsbruck, 01.10.2024

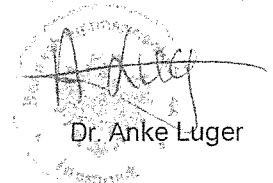
Adem KOCA, geb. 01.05.1986, Am Weinberg 26b/1, 6460 Imst

Bescheinigung

für Leichenüberführungen in das Ausland (§ 43 Gemeindesaniätsdienstgesetz)

Vor- und Familienname Adem KOCA	Geburtsdatum 01.05.1986
------------------------------------	----------------------------

Es wird bescheinigt, dass der Tod nicht infolge einer ansteckenden anzeigepflichtigen Krankheit eingetreten ist.


Dr. Anke Luger

Sayı : 012268/2024
Konu : TEREKE

T.C.
Bregenz Başkonsolosluğu

01.10.2024

CENAZE NAKİL BELGESİ

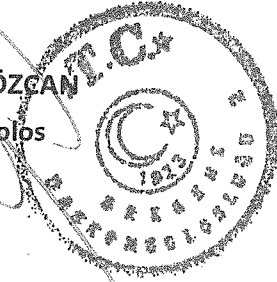
T.C.
YETKİLİ GÜMRÜK MÜDÜRLÜĞÜNE

Aşağıda kimlik ve ölüm tarihi hakkında gerekli bilgiler verilmiş olan vatandaşımızın cenazesi yurda nakledilmektedir.

Adı ve Soyadı : ADEM KOCA
Doğum yeri ve tarihi : GÜZELYURT - 01.05.1986 - T.C.No: 36473253520
Anne adı - Baba Adı : SİDDİK-YAŞAR
Ölüm tarihi ve yeri : 30.09.2024 HALL İN TİROL
Ölüm sebebi : Doğal Nedenler ()
Bulaşıcı hastalığı : Yok
Cenaze naklini üstlenen firma : HUZUR CENAZE
Gideceği yer : AKSARAY
Teslim edilecek kişi : MERMERLER CENAZE VE AİLE YAKINLARI
Nakil günü, vasıtası ve güzergahı : 02.10.2024 - Uçak ile - PEGASUS - MÜNİH - İSTANBUL - KAYSERİ - AKSARAY

Mevzuat dahilinde gerekli kolaylığın gösterilmesini müsaadelerinize saygılarımla rica ederim.

Özkan ÖZCAN
Konsolos



Not: Otopsi yapılmamıştır

Firma Yetkilisi :

KOCA

1	REPUBLIK ÖSTERREICH / République d'Autriche / Republic of Austria			
2	Standesamtsbehörde Service de l'état civil Civil Registry Office of		Standesamts- und Staatsbürgerschaftsverband Hall in Tirol	
	Auszug aus dem Sterbeeintrag Extrait de l'acte de décès no / Extract of the death record			
	Nr. 012268/2024			
4	Tag und Ort des Todes Date et lieu de décès Day and place of death	Jo 30	Mo 09	An 2024 Hall in Tirol
5	Name Nom Surname	Koca		
6	Vornamen Prénoms Forenames	Adem		
7	Geschlecht Sexe Sex	M		
8	Tag und Ort der Geburt Date et lieu de Naissance Day and place of birth	Jo 01	Mo 05	An 1986 Güzelyurt, Türkei
9	Name des letzten Ehegatten Nom du dernier conjoint Name of the last spouse	Koca		
10	Vorname des letzten Ehegatten Prénoms du dernier conjoint Forenames of the last spouse	Ayşe		
	12	Vater Père Father	13	Mutter Mère Mother
5	Name Nom Surname			
6	Vornamen Prénoms Forenames			
11	Tag der Ausstellung Date de délivrance Date of issue	Jo 01	Mo 10	An 2024
		Theis Unterschrift / Signature / Signature		
		Siegel / Sceau / Seal		

Dieser Pass wird entsprechend dem Straßburger Übereinkommen (Europaratsubereinkommen vom 26.10.1973 über die Leichenbeförderung, BGBl. Nr. 515/1978, insbesondere den Artikel 5) ausgestellt.

This laissez-passer is issued in accordance with the Agreement on the Transfer of Corpses, in particular Article 5.

Ce laissez-passer est délivré conformément aux termes de l'Accord sur le transfert des corps des personnes décédées, notamment des articles 3 et 5.

Hierdurch wird die Erlaubnis zur Beförderung der Leiche des / der erteilt:

Authority is hereby given for the removal of the body of

Il autorise le transfert du corps de

Name und Vorname des/der Verstorbenen/ Name and first name of the deceased/

Nom et prénom de la personne décédée : Adem KOCA

Geburtsdatum und -ort (wenn möglich) / Date and place of birth (if possible) / Date et lieu de naissance possible): 01.05.1986 Türkei

verstorben am / died on / décédée (e) le : 30.09.2024

in / at / à : Hall in Tirol

im Alter von / at the age of / à l'âge de : 38 Jahren

Todesursache (wenn möglich):

State cause of death (if possible)

Indiquer la cause du décès (si possible)

Infektiöse Leiche / Infectious corpse / Corps infectieux :

☐ ja /yes /oui

☒ nein /no /non

Die Leiche ist zu befördern in einem verzinkten und verlöteten Metallsarg.

The body is to be conveyed in a metal coffin galvanized and soldered.

Le corps doit être transporté dans un cercueil en métal galvanisé et soudé.

☐ **mit Druckausgleichsvorrichtung (bei Transport mit Flugzeug)**

with an equipment for pressure compensation (transport by plane)

avec l'appareil de compensation de pression (transport par avion)

☐ **gehüllt in ein Leichentuch mit antiseptischer Lösung (bei Infektionsleiche)**

shrouded in a burial shroud soaked with an antiseptic lotion (infectious corpse)

couvert dans un linceul imbibé avec un liquide antiseptique (corps infectieux)

Beförderungsmittel / Means of transport / Moyen de transport :

☒ **mittels Leichenwagen / by mortuary car / par corbillard**

☒ **mit dem Flugzeug / by plane / par avion**

Durch das Bestattungsunternehmen / by the undertaker's / par les pompes funèbres : Klicken Sie hier, um Text einzugeben.

von /from / de : Hall in Tirol

über/ via/ par: München

nach / to/ à : Ankara, Aksaray-Güzelyurt

Gefertigt am / done at / fait à: 01.10.2024

Da die Beförderung dieser Leiche ordnungsgemäß genehmigt wurde, werden alle Behörden der Staaten, durch deren Hoheitsgebiet die Leiche zu befördern ist, gebeten, sie ungehindert passieren zu lassen.

The transport of this corpse having been duly authorized, all and sundry authorities of the States over whose territory the corpse is to be conveyed are requested to let it pass without let or hindrance.

Le transfert de ce corps ayant été autorisé, toutes les autorités des Etats sur le territoire desquels le transport doit avoir lieu sont invitées à le laisser passer librement.

Für die Bezirkshauptfrau:

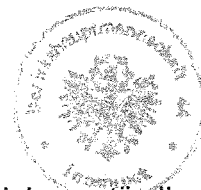
Dr. Anke Lugen



Unterschrift der zuständigen Behörde

Signature of the competent authority

Signature de l'autorité compétente



Dienststempel der zuständigen Behörde

Official stamp of the competent authority

Cachet officiel de l'autorité compétente

Gebühr von € 171,80 entrichtet!

(1) Jeder Leiche muss für die internationale Beförderung ein besonderes von der zuständigen Behörde des Abgangsstaates ausgestelltes Dokument (Leichenpass) beigegeben werden. (2) Der Pass muss mindestens die Angaben enthalten, die in dem als Anlage beigefügten Muster aufgeführt sind; der Pass muss in der Amtssprache oder einer der Amtssprachen des Staates, in dem er ausgestellt wird und in einer der Amtssprachen des Europarates ausgefertigt sein.	(1) Any corpse shall, during the transfer, be accompanied by a special document (laissez-passer for a corpse) issued by the competent authority of the State of departure. (2) The laissez-passer shall include at least the information set out in the model annexed to the present Agreement; it shall be made out in the official language or one of the official languages of the State in which it was issued and in one of the official languages of the Council of Europe.	Article 3 (1) Tout corps d'une personne décédée doit être accompagné au cours du transfert international d'un document spécial dénommé «laissez-passer mortuaire», créé par l'autorité compétente de l'Etat de départ. (2) Le laissez-passer doit produire au moins les données figurant dans le modèle annexé au présent Accord; il doit être rédigé dans la langue officielle ou l'une des langues officielles de l'Etat dans lequel il est délivré et dans une des langues officielles du Conseil de l'Europe.
Artikel 5 Der Pass wird von der in Artikel 8 dieses Übereinkommens genannten zuständigen Behörde nur dann ausgestellt, nachdem sie sich vergewissert hat, dass: (a) alle medizinischen, gesundheitlichen, verwaltungsmäßigen und rechtlichen Erfordernisse der im Abgangsstaat in Kraft befindlichen Bestimmungen über die Leichenbeförderung und – wenn angebracht – die Beisetzung und die Exhumierung erfüllt worden sind; (b) die Leiche in einen Sarg gelegt worden ist, der die Anforderungen der Artikel 6 und 7 dieses Übereinkommens erfüllt; (c) der Sarg nur die Leiche der in dem Pass genannten Person und die persönlichen Gegenstände enthält, die mit der Leiche beigelegt oder eingeäschert werden sollen.	Article 5 The laissez-passer is issued by the competent authority referred to in Article 8 of this Agreement, after it has ascertained that: (a) all the medical, health, administrative and legal requirements of the regulations in force in the State of departure relating to the transfer of corpses and, where appropriate, burial and exhumation have been complied with; (b) the remains have been placed in a coffin which complies with the requirements laid down in Articles 6 and 7 of this Agreement; (c) the coffin only contains the remains of the person named in the laissez-passer and such personal effects as are to be buried or cremated with the corpse.	Article 5 Le laissez-passer est délivré par l'autorité compétente visée à l'Article 8 du présent Accord après que celle-ci se soit assurée que: (a) les formalités médicales, sanitaires, administratives et les exigées pour le transport des corps des personnes décédées, et, le cas échéant, pour l'inhumation et l'exhumation, en vigueur dans l'Etat de départ, ont été remplies; (b) le corps est placé dans un cercueil dont les caractéristiques sont conformes à celles définies aux articles 6 et 7 du présent Accord; (c) le cercueil ne contient que le corps de la personne mentionnée dans le laissez-passer et les objets personnels destinés à être inhumés ou incinérés avec le corps.

Shipper's Name and Address 249 FAHAD ALHASHMI ARNOLD-SCHÖNBERG WEG 18 80939 MÜNCHEN				Shipper's account Number 21197		Not negotiable Air Waybill Issued by / PEGASUS AIRLINES PEGASUS HAVA TASIMACILIGI A.S BASIN EKSPRES CADDESI NO: 2/A 34303 KUCUKCEKMECE//HALKALI						
Consignee's Name and Address 249 FAHAD ALHASHMI ALFAN STREET VILLA 25 ABU DHABI, U.A.E.				Consignee's account Number 21197		It agreed that the goods described herein are accepted in apparent good order and condition (except as noted) for carriage SUBJECT TO THE CONDITIONS OF CONTRACT ON THE REVERSE HEREOF. ALL GOODS MAY BE CARRIED BY ANY OTHER MEANS INCLUDING ROAD OR ANY OTHER CARRIER UNLESS SPECIFIC CONTRARY INSTRUCTIONS ARE GIVEN HEREON BY THE SHIPPER, AND SHIPPER AGREES THAT THE SHIPMENT MAY BE CARRIED VIA INTERMEDIATE STOPPING PLACES WHICH THE CARRIER DEEMS APPROPRIATE. THE SHIPPER'S ATTENTION IS DRAWN TO THE NOTICE CONCERNING CARRIER'S LIMITATION OF LIABILITY. Shipper may increase such limitation of liability by declaring a higher value for carriage and paying a supplemental charge if required.						
Issuing Carrier's Agent Name and City PRO SERVICE GMBH 85356 MUNICH - DE/RA/00255-01						Accounting Information TEL. 971565555476						
Agent's IATA Code 23-4 7140 8015				Account No.		Reference:						
Airport of Departure (Addr. of first Carrier) and requested Routing MUNICH						Reference Number 50-60160-09-24						
to	By first Carrier		to	by	to	by	Currency	CHG Code	WT/VAL PP CC	Other PP CC	Decl. Value for Carriage	Decl. Value for Customs
AUH	PC						EUR	P	P	X	NVD	NCV
Airport of Destination ABU DHABI			Requested Flight / Date			Amount of Insurance NIL		INSURANCE - If carrier offers insurance, and such insurance is requested in accordance with conditions thereof, indicate amount to be in figures in box marked "Amount of Insurance".				
Handling Information ARTIKEL 137 UZK - DA - NO TAX FREE!! DE/RA/00255-01 "NOT SECURED CARGO"												
EC-STATUS: X												
No. of Pieces RCP	Gross Weight	kg lb	Rate Class	Commodity Item No.	Chargeable Weight	Rate Charge	Total	Nature and Quantity of Goods (incl. Dimensions of Volume)				
5	102,0	K	Q		109,5	3,46	378,87	PERSONAL EFFECTS NOT RESTRICTED HS CODE: 99050000 4 X 78 X 54 X 34 1 X 65 X 42 X 30				
5	102,0						378,87	TOTAL CBM: 0.655				
Prepaid Weight Charge Collect						Other Charges		CARGOSOURCE DE/RA/01291-01 Sign Belger 30. Sep. 2024 Time				
Valuation Charge						Total other Charges Due Agent		Shipper certifies that the particulars on the face hereof are correct and that insofar as any part of the consignment contains dangerous goods, such part is properly described by name and is in proper condition for carriage by air according to the applicable Dangerous Goods Regulations.				
Total other Charges Due Carrier						Signature of Shipper or his Agent PRO SERVICE GMBH ROY NASSIF		FOR ABOVE NAMED CARRIER: PEGASUS AIRLINES PRO SERVICE GMBH, AS AGENT 23.SEP.2024 85356 MUNICH - DE/RA/00255-01 Executed on (Date) at (Place) Signature of Issuing Carrier or its Agent				
Total prepaid Total collect						Total Collect Charges		624-5195 8874				
Currency Conversion Rates CC Charges in Dest. Currency						For Carrier's Use only at Destination		Charges at Destination				

ORIGINAL 1 (FOR ISSUING CARRIER)

Shipper's Name and Address 1407 LIEBHERR AEROSPACE LINDENBERG GMBH PFAENDERSTRASSE 50-52 88161 LINDENBERG		Shipper's account Number		Not negotiable Air Waybill Issued by / ISTANBUL, TURKIYE, 34800	
Consignee's Name and Address 5309 PEGASUS HAVA TASIMACILIGI ANONIM SIRKETI AEROPARK YENISEHIR MAH OSMANLI BULVARI NO:11/A KURTKOY / ISTANBUL		Consignee's account Number 11243		Copies 1, 2 and 3 of this Air Waybill are originals and have the same validity	
Issuing Carrier's Agent Name and City B.P.L. GMBH 22335 HAMBURG		Accounting Information TAX ID: 7230047085 FLIGHT: PC1020/02 E.T.A.: 16:15 HRS 02-10-2024		Reference: 24S03830/668468	
Agent's IATA Code 23-4 7442 2230		Account No. 0		Reference Number 11-10-24-5667	
Airport of Departure (Addr. of first Carrier) and requested Routing MUENCHEN		Optional Shipping Inform.		Currency EUR	
to	By first Carrier	to	by	to	by
SAW	PC				
Airport of Destination SABIHA GOKCEN/IST		Requested Flight / Date PC1020/02		Amount of Insurance NIL	
Handling Information SPX BY KC DE/RA/01225-02 MARC GIELOW 01.10.2024 17:59		INSURANCE - If carrier offers insurance, and such insurance is requested in accordance with conditions thereof, indicate amount to be in figures in box marked "Amount of Insurance".			
ATTACHED: EXPORT DOCS /POPI0002909		EC-STATUS: X			
No. of Pieces RCP	Gross Weight	kg lb	Rate Class	Chargeable Weight	Rate Charge
1	1,7	K M		3,0	250,00
Total		Nature and Quantity of Goods (incl. Dimensions of Volume)		Total	
250,00		CIVIL AIRCRAFT SPARE PARTS NOT RESTRICTED CARGO		250,00	
		HS CODE: 84213935 1 X 44 X 18 X 20			
MRN:24DE755143890546B2				250,00	
1				TOTAL CBM: 0,016	
Prepaid Weight Charge Collect		Other Charges		FSC 2,85 SCC 0,15	
250,00					
Valuation Charge					
Total other Charges Due Agent		Shipper certifies that the particulars on the face hereof are correct and that insofar as any part of the consignment contains dangerous goods, such part is properly described by name and is in proper condition for carriage by air according to the applicable Dangerous Goods Regulations.			
		B.P.L. GMBH MARC GIELOW Signature of Shipper or his Agent			
Total other Charges Due Carrier					
3,00					
Total prepaid		Total collect			
253,00					
Currency Conversion Rates		CC Charges in Dest. Currency			
For Carrier's Use only at Destination		Charges at Destination		Total Collect Charges	