

POSTUP k získaniu CyprusFlightPass

Online formulár treba vyplniť:

24 hodín pred odletom – platí pre nezaočkovaných cestujúcich,

48 hodín pred odletom – platí pre zaočkovaných cestujúcich

Na stránke: <https://cyprusflightpass.gov.cy/en/login> je potrebné si vytvoriť účet (kliknete na „Create account“):

- zadaním vášho mena (First name), priezviska (Last name), vašej mailovej adresy a dostatočne bezpečného hesla (Password), ktoré má obsahovať veľké i malé písmená, číslovky a nejaký znak (napr. @);
- opätovného vpísania hesla do riadka „Password Confirmation“;
- prosím, nezabudnite následne označiť, že ste čítali a prijali podmienky („I have read and accept Terms of Use.“)
- po potvrdení vytvorenia účtu, ktoré vám príde na vami zadanú mailovú adresu (do mailovej schránky vám príde správa „Confirm Account“, po ktorej otvorení kliknete na „Activate“);
- následne sa otvorí stránka CyprusFlightPass, kde treba znovu vpísať e-mailovú adresu a heslo, kliknúť na „Login“ a ďalej na Apply here“ podľa toho, či ste nezaočkovaný (v tom prípade si zvolíte pole „If not vaccinated“) alebo zaočkovaný (vtedy zvolíte pole „If vaccinated“)

Ďalej vyplňate požadované údaje BEZ DIAKRITIKY:

Last name - priezvisko

First name – krstné meno

Middle initial – stredné meno (ak existuje)

ID / passport – číslo občianskeho preukazu / pasu

Nationality – národnosť

Date of birth – dátum narodenia

Country of birth – krajina narodenia

Gender – pohlavie (male – muž, female – žena)

Contact details

Where you can be reached

(na akom tel. čísle budete dostupný – uviesť so slovenskou predvoľbou 00421)

Vaccination details (vyplňajú iba zaočkovaní cestujúci)

Vaccination country – krajina, v ktorej ste zaočkovaný

Vaccine type – typ vakcíny

Date of 1st dose – dátum prvej dávky vakcíny

Date of 2nd dose – dátum druhej dávky vakcíny

Flight Information (pre nezaočkovaných) – kliknete hneď na prvú možnosť (priamy let)



Direct Flight to the Republic of Cyprus

Flight details / Details of final flight (to the Republic of Cyprus)

Country of Departure – destinácia, z ktorej cestujete, teda Slovakia

Departure Date & Time (Country of Departure) – dátum a čas odletu do destinácie (uvedené na voucher-i)

Airline Name – názov leteckej spoločnosti

Flight Number – číslo letu (uvedené na voucher-i)

Seat Number (číslo sedačky – iba ak je známe)

Airport of Arrival – letisko, na ktoré priletíte (Larnaca – LCA)

Departure date from Cyprus - dátum odletu z destinácie (uvedené na voucher-i)

Následne venujte pozornosť nižšie uvedenému a označte pravdivú možnosť (iba pri nezaočkovaných cestujúcich):

1. 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. (Počas posledných 14 dní pred mojou cestou do Cyperskej republiky som nezostal / nežil v krajinách s menej priaznivými epidemiologickými kritériami (šedá (kategória s osobitným povolením)) v porovnaní s krajinou odletu, podľa oznámenia o kategorizácii príslušných krajín Cyperskej republiky.)
2. If you have 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 your travel to the Republic of Cyprus, as per relevant Country categorization announcement of the Republic of Cyprus. Please state the Country/ies below. (Ak ste v posledných 14 dňoch pred cestou do Cyperskej republiky zostali / žili v krajinách s menej priaznivými epidemiologickými kritériami (šedá (kategória s osobitným povolením)) v porovnaní s krajinou odletu, podľa príslušného oznámenia krajiny o kategorizácii krajiny Cypru, prosím, uveďte štát/y nižšie.)

Čo sa týka kategorizácie krajín – viď:

<https://cyprusflightpass.gov.cy/en/country-categories>

Covid-19 test information (iba pri nezaočkovaných cestujúcich)

Označíte odpoveď na otázku:

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? (Vykonali ste za posledných 72 hodín pred odletom PCR test potvrdzujúci negatívny výsledok na COVID-19 a vlastníte platný dokument?)

Ďalej vyplníte:

Time and date you provided your sample for the test - čas a dátum odobratia vzorky na PCR test

Type of test – typ testu (antigénový test nie je akceptovateľný)

Označíte „Test result is negative“ (Výsledok testu je negatívny)

Časť „Passengers who meet the requirements for a test in the Republic of Cyprus“ sa netýka občanov SR, preto ju nevyplňajte, prosím.

Postupujte nasledovnými bodmi (zaočkovaní i nezaočkovaní cestujúci):

Purpose of Travel (dôvod cesty)

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

(Ste trvalým občanom Cypru vracajúcim sa zo zahraničia?)

YES NO (vyberte možnosť NIE)

Please state the purpose of your visit in Cyprus (vyberte prvú možnosť návštevy Cypru – dovolenka)

Holidays

Permanent Address (trvalé bydlisko) – vyplňať BEZ DIAKRITIKY

Number and Street – ulica a číslo domu

Apartment Number – nie je nutné

City – mesto

State / Province – okres

Country - krajina
ZIP / Postal Code – PSČ

Temporary/Permanent Address in the Republic of Cyprus (prechodná adresa v destinácii) – v závere tohto manuálu uvádzame adresy jednotlivých ubytovacích zariadení

Hotel Name – názov hotela
Number and Street – ulica a číslo
Apartment Number – nie je nutné
City – mesto
District – okres
ZIP / Postal Code – PSČ

Emergency Contact Information

Of someone who can reach you during the next 30 days (**Include country code and city code**)
(v núdzovom prípade kontakt na osobu, ktorá vás môže kontaktovať nasledujúcich 30 dní)

Last (Family) Name – priezvisko
First (Given) Name – krstné meno
Mobile – tel. číslo uvedené bez medzier a so slovenskou predvoľbou 00421
Other – ďalšie telefónne číslo tejto osoby, ak je k dispozícii
E-mail Address – e-mailová adresa danej osoby
Country – krajina
City – mesto

V ďalšom kroku je potrebné označiť uvedené vyhlásenia („solemn declarations“):

I consent for possible COVID-19 sample testing, if requested, upon arrival to the Republic of Cyprus.

(Súhlasím s možným testovaním na Covid-19 pri vstupe do Cyperskej republiky.)

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.

(Som si plne vedomý/á rizík a nebezpečenstiev spojených s mojím letom a pobytom v Cyperskej republike v dôsledku pandémie COVID-19. Prijímam plnú zodpovednosť za akékoľvek riziká straty, ublíženia, poškodenia majetku, zranenia alebo smrti, vrátane mojich spolucestujúcich/rodinných príslušníkov (v prípade, že so mnou cestujú) do 18 rokov a súhlasím s tým, že nebudem uplatňovať nároky a nebudem konať proti osobe a/alebo akémukoľvek druhu podnikania a/alebo oprávneným úradníkom a/alebo orgánom Cyperskej republiky z dôvodu akýchkoľvek strát, prekážok, škôd alebo nákladov, ktoré mi môžu vzniknúť počas môjho cestovania a pobytu do Cyperskej republiky v dôsledku COVID-19 a/alebo akýchkoľvek neprijemností mojich či mojich spoločníkov alebo rodinných príslušníkov do 18 rokov, s ktorými cestujem (ak existujú) kvôli preventívnym opatreniam uplatňovaným počas mojej cesty a môjho pobytu v Cyperskej republike pre účely ochrany verejného zdravia proti COVID-19. Toto vyhlásenie je záväzné pre mojich spolucestujúcich/členov rodiny (ak existujú), manžela/manželku, mojich dedičov, poverených, osobných zástupcov a exekútorov.)

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).

(Po mojom návrate do krajiny trvalého pobytu alebo do krajiny, do ktorej sa vraciam po skončení môjho na Cypre, budem informovať zdravotnícke služby Cyperskej republiky na Cypre v prípade, že sa u mňa objavia príznaky COVID-19 do 14 dní po odchode z Cyperskej republiky - e-mailová adresa na korešpondenciu monada@mphs.moh.gov.cy).

I have not experienced one of the following symptoms – fever, cough, sore throat, runny nose, sudden shortness of breath or diarrhea, nausea, vomiting, myalgia, within the last 14 days or I have not been in direct contact with a confirmed or suspected COVID-19 patient within the last 14 days or I have not visited and/or needed inpatient treatment in any healthcare facility or confinement facility used for the treatment or quarantine of COVID-19 confirmed or suspected persons within the last 14 days.

(Nesporoval/a som ani jeden z nasledujúcich príznakov - horúčka, kašeľ, bolesť hrdla, výtok z nosa, náhla dýchavičnosť alebo hnačka, nevoľnosť, zvracanie, bolestivé tuhnutie svalov, za posledných 14 dní, alebo som nebol/a v priamom kontakte s potvrdeným alebo podozrivým pacientom COVID-19 za posledných 14 dní, alebo som nenavštívil/a žiadne zdravotnícke zariadenie či nepotreboval/a nemocničnú liečbu v zdravotníckom zariadení ani karanténnom zariadení na liečbu COVID-19 potvrdených alebo podozrivých osôb za posledných 14 dní.)

I declare under penalty of perjury under the laws of the Republic of Cyprus that the facts and information I have provided, are true.

(Vyhlasujem pod hrozbou trestu za krivú prisahu podľa právnych predpisov republiky Cyprus, že skutočnosti a informácie, ktoré som uviedol/la, sú pravdivé.)

Dotazník sa následne zosumarizuje (kliknúť na „Submit“), objaví sa ďalšia strana, kde nahráte dokument s negatívnym výsledkom PCR testu („Attach Covid-19 test“ - platí pre nezaočkovaných cestujúcich) alebo potvrdenie o kompletnom zaočkovaní („Attach vaccination document“ – platí pre zaočkovaných cestujúcich). Potom kliknite na „Request“ a vtedy vám príde na vami zadanú mailovú adresu tzv. flightpass, ktorý je potvrdením o tom, že bol formulár odoslaný, a ktorým sa prípadne preukážete pri pasovej kontrole v destinácii. Taktiež môžete kliknúť na možnosť „Download here“, kde sa vám flightpass konvertuje do PDF verzie, ktorú si môžete vytlačiť. Odporúčame však mať formulár stiahnutý i v mobile.

Dospelí si musia formulár spraviť sami za seba – počnúc vytvorením účtu.

V prípade, že máte spolucestujúceho mladšieho ako 18 rokov (teda i infantov), kliknete na „Add passenger“ a vyplňate údaje týkajúce sa tejto osoby. Princíp vystavenia flightpassu je rovnaký. V závere dotazníka je však časť „Guardian information“, v ktorej zákonný zástupca dieťaťa uvedie svoje priezvisko (Last name), krstné meno (First name) a číslo cestovného dokladu (ID/Passport). Nakoniec označí nasledovné vyhlásenie:

I/We solemnly declare and affirm that all Information and Declarations given in respect of the child in this application is true. I/We have full knowledge and consent to the submission of this application of the child. I/We make this SOLEMN DECLARATION conscientiously and with the knowledge that making a false and/or misleading declaration, will be subject to sanctions, under penalty of perjury under the laws of the Republic of Cyprus.

(Čestne vyhlasujem/e a potvrdzujem/e, že všetky informácie a vyhlásenia uvedené v tomto dotazníku týkajúce sa dieťaťa sú pravdivé. Súhlasím/e s predložením tohto formulára dieťaťa. Toto VYHLÁSENIE predkladáme svedomito a s vedomím, že nepravdivé alebo zavádzajúce informácie budú podliehať sankciám, ktoré budú následne podliehať trestu za krivú prisahu podľa zákonov Cyperskej republiky.)

Opäť treba kliknúť na „Submit“ a pokračovať v postupe ako pri prvom pasažierovi.

Teda príklad: štvorčlenná rodina - jeden z manželov vytvorí účet sebe a pridá si do svojho formulára deti a partner si vytvorí samostatný účet.

UPOZORNENIE

Kto príde na Cyprus bez toho, aby riadne elektronicky vyplnil „flightpass“, bude musieť zaplatiť pokutu, alebo mu bude zamietnutý vstup na územie Cyperskej republiky.

Adresy ubytovacích zariadení:

Tsokkos Protaras Beach

8 Lefkolas Street, Protaras, Paralimni, 5296, Ammochostos, Cyprus

Nelia Beach

Sklavou 4, 5340 Ayia Napa, P.O.Box 30122, 5340 Ayia Napa – Cyprus

Leonardo Plaza Cypria Maris Beach

10, Theas Afroditis Avenue, 8204 Yeroskipou, P.O.Box 60456, 8127 Paphos, Cyprus

Leonardo Cypria Bay

10, Poseidonos Ave, 8204 Yeroskipou, 8127 Paphos, Cyprus

Dome Beach

19 Makronissou Street, Ayia Napa, 5330, Ammochostos, Cyprus

St. Raphael Resort

Amathus Avenue P.O. Box 51064, 3594 Limassol, Cyprus

Chrysomare Beach Hotel and Resort

Nissi Avenue Ayia Napa District, 5330, Cyprus

Constantinos the Great

29 Protaras Avenue, Protaras, Paralimni, 5296, Ammochostos, Cyprus

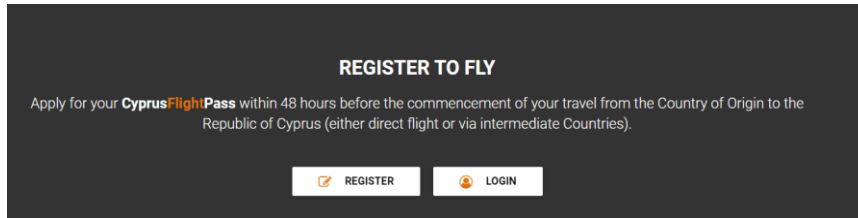
Vrissiana Beach Hotel

33 Protara Avenue, Protaras, Paralimni, Ammochostos, 5296, Cyprus

Návod na vyplnenie formuláru Cyprus Flight Pass pre vstup na Cyprus

Formulár je nutné vyplniť 48 hodín pred odletom na <https://cyprusflightpass.gov.cy>

1) Stlačte „Register“.



2) Vytvorte si konto. Vyplňte: meno, priezvisko, e-mail, heslo 2x, zakliknite prečítanie a akceptovanie podmienok „I have read and I accep the Terms of Use“ a stlačte „Register“

Create Account

First name
MONIKA

Last name
KARTAGOVA

Email address
bXXXXX@XXXX.XX

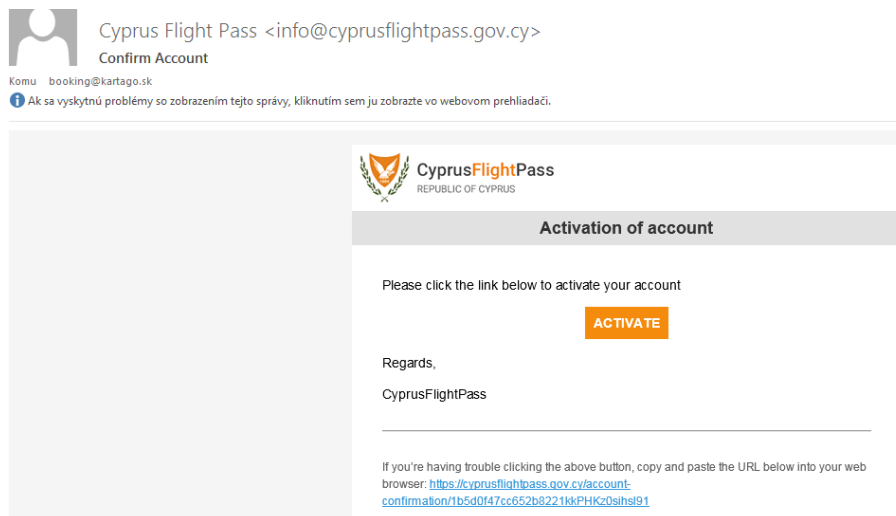
Password
.....

Password Confirmation
.....

I have read and I accept the [Terms of Use](#)

[Already have account](#) **REGISTER**

3) Na e-mail vám príde správa pre aktiváciu účtu. Stlačte „Activate“.




4) Prihláste sa a stlačte „Login“


Account has been successfully created. Please check your email to activate your account ×


Login


Email address

 xxxxx@xxxx.xx

Password



 [Create Account](#)

 [I forgot my password](#)

LOGIN

5) Požiadajte o svoj CyprusFlightPass do 48 hodín pred začiatkom cesty z krajiny pôvodu do Cyperskej republiky. Vyberte si možnosť, či ste alebo nie ste očkovaní na Covid-19.

My Account

Welcome to **CyprusFlightPass!**

Apply for your CyprusFlightPass within **48 hours** before the commencement of your travel from the Country of Origin to the Republic of Cyprus (either direct flight or via intermediate Countries).

IF NOT VACCINATED from the countries listed here.

APPLY HERE

IF VACCINATED from the countries listed here.

APPLY HERE

Ak nie ste očkovaní, stlačte tu

⇒

Ak ste očkovaní, stlačte tu

⇐

*Conditions apply. For more info, please click here, if vaccinated or click here, if not vaccinated.

Details	Account Details	
Edit	First name:	MONIKA
Change password	Last name:	KARTAGOVA
Draft submissions	Email address:	xxxxxx@xxxx.xx
Submissions		
Special Permissions / Payment		

6) Vzor na vyplnenie pre nezaočkované osoby. Vyplňte priezvisko, meno, číslo pasu alebo občianskeho preukazu, národnosť, dátum narodenia, krajinu narodenia, pohlavie, mobilné číslo, e-mail

Cyprus Flight Pass Request

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 KARTAGOVA	First (Given) Name MONIKA	Middle Initial (if any)
ID / Passport No BG000000	Nationality SLOVAKIA	
Date of Birth 08-07-1972	Country of Birth SLOVAKIA	Gender FEMALE

Contact Details

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

Mobile (eg. 0035799XXXXXX for Cyprus phone) 00421948000000	Other (if any)
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E-mail Address XXXXXX@XXXX.XX

Vyberte priamy let na Cyprus „Direct Flight to the Republic of Cyprus“, dátum odletu, leteckú spoločnosť a číslo letu podľa komplexného cestovného odbavenia, krajinu z ktorej odlietate, letisko na Cypre, dátum odletu z Cypru späť, ak dátum odchodu z Cypru nie je k dispozícii, uveďte dĺžku plánovaného pobytu na Cypre (iba v prípade jednosmernej letenky) a potvrdíte, že ste za posledných 14 dní neboli v krajine, ktorá je Cyperskou republikou označená ako sivá.

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) 11-06-2021 12:31:19		
Airline Name AUSTRIAN AIRLINES		
Flight Number OS0831		
Country of Departure AUSTRIA		
<input type="checkbox"/> Please select this box if your flight is private.		
Seat Number (if available)	Airport of Arrival LARNAKA (LCA)	Departure date from Cyprus (if available) 18-06-2021
If departure date from Cyprus is not available, please state the length of your intended stay in Cyprus		
<input checked="" type="radio"/> Less than 12 months		
<input type="radio"/> 12 months or more		
<input checked="" type="checkbox"/> 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.		

Ak máte negatívny výsledok PCR testu zaklikite „Yes“, uveďte dátum a čas vykonania testu, typ testu „Molecular Method (RT-PCR)“ a „Test result is Negative“

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
09-06-2021 08:59:16

Type of Test
MOLECULAR METHOD (RT-PCR)

Please note that antigen or antibody tests are not accepted

Test result is NEGATIVE

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

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 below categories of passengers who have the option not to perform a laboratory test 72 hours before departure but instead to perform a laboratory test only 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 a laboratory test, only upon your arrival to the Republic of Cyprus and not 72 hours before departure, you will remain in a state of compulsory self-isolation or mandatory isolation quarantine for 72 hours following your arrival and you must repeat a molecular test RT-PCR for COVID-19, upon completion of the 72 hours, at your own expense, as described below.

Účel cesty. Ak nie ste rezidentom Cypru kliknite na „NO“ a vyberte účel cesty „Holidays“.
Uveďte vašu trvalú adresu a následne adresu vášho pobytu na Cypre: hotel, adresa hotela, mesto, oblasť, smerovacie číslo.

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

VAJNORSKA 100

Apartment Number (if available)

City

Bratislava

State / Province

SLOVAKIA

Country

SLOVAKIA

ZIP / Postal Code

83104

Temporary/Permanent Address in the Republic of Cyprus

SAME AS ABOVE

Hotel Name (if any)

NICHOLAS COLOR

Number and Street

NISSI AVENUE, Ayia Napa

Apartment Number (if available)

City

Ayia Napa

District

Ayia Napa

ZIP / Postal Code

5330

Vyplňte emergency kontakt na inú osobu, zakliknite všetky políčka podľa obrázku a stlačte submit.

Emergency Contact Information

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

Last (Family) Name KARTAGOVA	First (Given) Name LUCIA
Mobile (eg. 0035799XXXXXX for Cyprus phone) 00421948000001	Other (if any)
E-mail Address (if any) XXXXXX@XXXX.XX	
Country SLOVAKIA	City Bratislava

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).
- 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

Nakoniec pripojíte negatívny výsledok testu na Covid-19 „Attach Covid-19 Test“ a stlačte „Request“.



Cyprus Flight Pass Request

BACK

Flight Information

Direct Flight to the Republic of Cyprus	
Country of Departure / Departure Date & Time	Austria / 11-06-2021 12:31
Airline Name	AUSTRIAN AIRLINES
Flight Number / Registration Number (Private Flights)	OS0831
Airport of Arrival	LARNAKA (LCA)

Passenger Information

Fullname	MONIKA KARTAGOVA
ID / Passport No	BG00000
Nationality (Country)	Slovakia
Passenger Type	Not in exception list
COVID-19 Test	Type of Test: RT-PCR Time and date you provided your sample for the test: 09-06-2021 08:59 Is Negative? YES

ATTACH COVID-19 TEST

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

Request my **CyprusFlightPass**

REQUEST

7) Vzor na vyplnenie pre zaočkované osoby. Vyplňte priezvisko, meno, číslo pasu alebo občianskeho preukazu, národnosť, dátum narodenia, krajinu narodenia, pohlavie, mobilné číslo, e-mail, krajinu vakcinácie, typ vakcíny, dátum prvej dávky a dátum druhej dávky.

CyprusFlightPass Request as vaccinated passenger

Apply for your **CyprusFlightPass** [within 48 hours](#) before the commencement of your travel 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.

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

Please note that in the case of a person who has been administered with a combination of different types of the acceptable vaccines (eg 1st dose Vaxzevria (AstraZeneca) and second dose Pfizer-BioNTech), at the stage of completing the application for the purpose of obtaining the cyprusflightpass the vaccine administered to him/her as a second dose has to be declared, recording at the same time as the first dose the date of administration of the first vaccine.

Please use only latin characters

Passenger Information			Passenger Information
Last (Family) Name	First (Given) Name	Middle Initial (if any)	Contact Details
KARTAGOVA	MONIKA		Vaccination Details
ID / Passport No	Nationality		Details of your final flight (to the Republic of Cyprus)
BG00000	SLOVAKIA		Purpose of Travel
Date of Birth	Country of Birth	Gender	Permanent Address
08-07-1987	SLOVAKIA	FEMALE	Temporary/Permanent Address in the Republic of Cyprus

Contact Details

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

Mobile (eg. 0035799XXXXXX for Cyprus phone)

00421948000000 Other (if any)

E-mail Address

XXXXXXXX@XXXX.XX

Vaccination Details

Vaccination Country

SLOVAKIA

Vaccine Type

Pfizer - BioNTech

Vaccination Doses

Date of 1st dose

05-03-2021

Date of 2nd dose

02-04-2021

Detaily letu: deň a čas odletu na Cyprus, letecká spoločnosť a číslo letu podľa komplexného cestovného poistenia, krajina odletu, letisko priletu a dátum odletu z Cypru.

Details of your final flight (to the Republic of Cyprus)

Departure Date & Time (Country of Departure)

11-06-2021 14:41:06

Airline Name

AUSTRIAN AIRLINES

Flight Number

OS0831

Country of Departure

AUSTRIA

Please select this box if your flight is private.

Seat Number (if available)

Airport of Arrival

LARNAKA (LCA)

Departure date from Cyprus (if available)

20-06-2021

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

Účel cesty. Ak nie ste rezidentom Cypru kliknite na „NO“ a vyberte účel cesty „Holidays“. Uvedte vašu trvalú adresu a následne adresu vášho pobytu na Cypre: hotel, adresa hotela, mesto, oblasť, smerovacie číslo.

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

VAJNORSKA 100

Apartment Number (if available)

City

Bratislava

State / Province

SLOVAKIA

Country

SLOVAKIA

ZIP / Postal Code

83104

Uveďte vašu trvalú adresu a následne adresu vášho pobytu na Cypre: hotel, adresa hotela, mesto, oblasť, smerovacie číslo. Vypĺňte emergency kontakt na inú osobu, zakliknite všetky políčka podľa obrázku a stlačte submit.

Temporary/Permanent Address in the Republic of Cyprus

SAME AS ABOVE

Hotel Name (if any)
NICHOLAS COLOR

Number and Street
NISSI AVENUE

Apartment Number (if available)

City
LARNACA

District
AYIA NAPA

ZIP / Postal Code
5330

Emergency Contact Information

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

Last (Family) Name
KARTAGOVA

First (Given) Name
LUCIA

Mobile (eg. 0035799XXXXXX for Cyprus phone)
0042194800001

Other (if any)

E-mail Address (if any)
XXXXXXXX@XXXX.XX

Country
SLOVAKIA

City
Bratislava

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).
- 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

Nakoniec pripojíte certifikát o očkovaní na Covid-19 „Attach Vaccination document“ a stlačte „Request“.

Attach Vaccination Document

BACK

Details of your final flight (to the Republic of Cyprus)	
Country of Departure / Departure Date & Time	Austria / 11-06-2021 14:41
Airline Name	AUSTRIAN AIRLINES
Flight Number / Registration Number (Private Flights)	OS0831
Airport of Arrival	LARNAKA (LCA)

Passenger Information	
Fullname	MONIKA KARTAGOVA
ID / Passport No	BG00000
Nationality (Country)	Slovakia

Vaccination Details	
Vaccine Type	Pfizer - BioNTech
Vaccination Country	Slovakia
Vaccination Doses	
Date of 1 st dose	05-03-2021
Date of 2 nd dose	02-04-2021
Vaccination Document	ATTACH VACCINATION DOCUMENT

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

Request my **CyprusFlightPass**

You must upload your vaccination document.

REQUEST

8) Na obrazovke sa zobrazí správa o úspešnej registrácii.

Result of Request

Your **CyprusFlightPass** has been approved!!!

We just sent you an email that contains your CyprusFlightPass. Please check your inbox for an email from info@cyprusflightpass.gov.cy

[DOWNLOAD HERE](#) [ADD PASSENGER](#)

Ak chcete uložiť dokument CyprusFlightPass do počítača alebo mobilu, kliknite na „DOWNLOAD HERE“. Ak chcete pridať ďalšieho účastníka, kliknite na „ADD PASSENGER“. Na e-mailovú adresu uvedenú pri registrácii dostanete dokumenty: CyprusFlightPass (CFP) a váš súbor s výsledkami testu na COVID-19. Vytičený dokument a certifikát CyprusFlightPass (CFP) s výsledkom testu COVID-19 alebo certifikátom o vakcinácii, by ste si mali vziať so sebou na letisko. Formulár CyprusFlightPass (CFP) by mal vyplniť každý účastník zájazdu. Ak je účastníkom cesty maloletý, formulár by mal vyplniť rodič alebo zákonný zástupca dieťaťa.