



# Application for Issue or Renewal of an Aerodrome Operating Certificate under CAR Part 139

## 1. Applicant/Aerodrome Details

(a) Legal name of applicant/organisation:			
(b) Name of Aerodrome:			
(c) Trading name (if any):			
(d) Client No. (if known):			
(e) Postal Address: <i>(Address for Service, Ref Civil Aviation Act Section 48)</i>			
	Telephone:	Fax:	
	Email:		
(f) Business Address: <i>(if different from above)</i>			
	Telephone:	Fax:	
	Email:		
(g) Your reference:	<i>(order number/contact person or other reference)</i>		

## 2. Reason for Application – Mark appropriate box

Initial Issue: <input type="checkbox"/>	Renewal: <input type="checkbox"/>
---	-----------------------------------

## 3. Questionnaire

	Yes*	No
(a) Has the organisation been convicted for any transport safety offence in the last five years or is the organisation presently facing charges for a transport safety offence?	<input type="checkbox"/>	<input type="checkbox"/>
(b) Has the organisation previously had an application for an aviation document rejected or has an aviation document held by the organisation been suspended or revoked?	<input type="checkbox"/>	<input type="checkbox"/>

*\*If answering "Yes", please provide details on separate sheets enclosed in a sealed envelope marked "Confidential, Director, Civil Aviation Safety Authority". Include organisation name, client number (if known) and the type of certificate applied for.*

## 4. Aeroplanes for which the aerodrome facilities are intended

Aeroplanes having a certificated seating capacity in excess of 20 passengers <input type="checkbox"/>	Aeroplanes above 5700 kg maximum Certificated take-off weight <input type="checkbox"/>
Aeroplanes at or below 5700 kg maximum certificated take-off weight <input type="checkbox"/>	Helicopters <input type="checkbox"/>

## 5. Aerodrome Limitations

Brief summary of any limitations on the use of the aerodrome:

**6. Senior Persons**

For initial issue or for a change of Senior Persons, a separate form CASA FPP must accompany this application for each of the senior persons nominated below.

List of Senior Persons and their areas of responsibility (Ref CAR Part 139.55(a)(1) and (2))

**7. Declaration**

This application is made for and on behalf of the applicant or organisation identified above. I certify that I am empowered by the applicant or organisation to ensure that all activities undertaken by the applicant or organisation can be financed and carried out in accordance with the standard required by the Authority.

Full name of (proposed) Chief Executive: .....

Signature of (proposed) Chief Executive: .....

Date of Application: ..... Client No.: (if known).....

**Notes:**

The provision of false information or failure to disclose information relevant to the grant or holding of an aviation document constitutes an offence under Section 304 of the Civil Aviation Act 2000 and is subject, in the case of a person other than an individual, to a maximum fine of K100, 000.

An application fee of K5, 000.00 will be by bank draft payable to the below account and CASA Receipt obtained from the CASA Accounts Section upon evidence of payment.

Account Name: CASAPNG OPS  
Account No: 13507607  
Bank: ANZ – Jacksons Airport  
Swift Code No: ANZBPGPX  
BSB No: 18900

The completed application and Aerodrome Certification Exposition together with the CASA Receipt should be submitted to:

The Director  
Civil Aviation Safety Authority  
PO Box 1941 **BOROKO**,  
National Capital District,  
Papua New Guinea

**OFFICE USE ONLY**

1. Received by: ..... 2. Date Received: ..... 3. Job No.: .....

4. Completed by: ..... 5. Certificate issue date: .....