



APPLICATION FOR ISSUE OR RENEWAL OF AN IFP SERVICE
CERTIFICATE AND OPERATION

ISSUED FOR USE
CA 173-01

Reference:

CAR 173

Instructions:

- a) For initial issue, or re-certification after lapse or cancellation, the completed application, together with the fee of PGK16,000 and supporting documentation, should be submitted to:
- The Director**
Civil Aviation Safety Authority of Papua New Guinea
PO Box 1941,
BOROKO 111
Papua New Guinea
ANS@casapng.gov.pg
- b) Please ensure all documents and applicable fees are enclosed. No application will be processed until all required documentation and applicable fees are received.
- c) The application must include
- completed rule compliance matrix [CA 173/02 & CAR Part 100 Compliance Matrix](#) as applicable to your type of operation.
 - a complete exposition as required by rule 173.73.
- d) Applications must be received, with all completed information
- for initial issue at least 90 days prior to intended operation;
 - for renewal at least 60 days prior to certificate expiry.
- e) Further notes and instructions are included in the grey margins of the different sections.
- f) Use additional sheets such as those included at the end of the form to provide further details and explanations that do not fit in the original sections of the form.

1. Organisation Details

CA Participant Number (if known)		Companies Office No.	
Legal Name of Organisation			
A certificate will be issued only to a registered company, a partnership, a sole trader or an incorporated society. For a registered company, submit a copy of the Companies Office Certificate of Incorporation for initial issue or for an amendment involving a change to the legal name of the organisation.			
Trading or Division name (if any)			
Address for Service (Address for Service of Notices Ref Civil Aviation Act Section 48) requires applicants to provide an address for service in PNG (ie, a physical address) and to promptly notify the Director of any changes.		Postal Address (if different from Address for Service)	
Post Code		Post Code	
Tel		Tel	
Fax		Fax	
Email		Email	



Your reference – or –	
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Details of the person who may be contacted for further information

Name		Position	
Tel		Mobile	
Fax		Email	

2. Questionnaire

<i>These two questions must be answered for the initial issue and for the renewal of a certificate.</i>	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?	Yes / No <input type="checkbox"/> / <input type="checkbox"/>
	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?	Yes / No <input type="checkbox"/> / <input type="checkbox"/>
Note	If "Yes", please provide details with this application on separate sheets.	

3. Instrument Flight Procedures to be Provided (Ref ICAO Doc 8168 Vol II Categories)

<i>Mark the appropriate boxes</i>			
Conventional instrument procedures* (Part II)	<input type="checkbox"/>	RNAV and satellite-based procedures* (Part III)	<input type="checkbox"/>
Helicopter procedures* (Part IV)	<input type="checkbox"/>	ATC lateral separation procedures (CAR Part 172)	<input type="checkbox"/>
* Including associated IFR significant fixes, points and meteorological minima			

4. Exposition

<i>List the manuals that constitute the exposition required by CAR 173.73 For renewal list the publications already held by CASA and their latest amendment status.</i>	Manual Titles	Amendment No. and date

Also complete and submit the applicable CAR Part 173 & 100 Rule Compliance Matrix to show compliance with the rule requirements in the exposition.

5. Senior Persons

Separate forms must accompany this application for each of the nominated senior persons as shown below.

For both Initial issue and Renewal (for changed and unchanged persons):
Form CA-FPP.V03 and supporting documents or and CV

Nominated persons area(s) of responsibility as per 173.51(a)(1)&(2)	Name & company title	Participant No. (if known)
Chief Executive		



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Indicate any senior persons that are being removed from the organisation's certificate.	Removed persons

I hereby nominate the above person(s) for the responsibilities indicated.

Signature of Chief Executive or Board Chairperson		Date	
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6. Number of Personnel (Ref CAR Part 173.51(a)(3))

1 – 5 <input type="checkbox"/>	6 – 10 <input type="checkbox"/>	11 – 50 <input type="checkbox"/>	> 50 <input type="checkbox"/>
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7. Number of Appropriately Trained Personnel (Ref CAR Part 173.51(b))

1 – 5 <input type="checkbox"/>	6 – 10 <input type="checkbox"/>	11 – 50 <input type="checkbox"/>	> 50 <input type="checkbox"/>
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8. Exemptions

List any exemptions you hold (list numbers and applicable rules).	
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9. Declaration by Chief Executive

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 K100,000.00	I have obtained a current copy of CAR Part 173 and AC173-1, and have read and understood the contents as they apply to this application. I also have a current copy of CAR Parts 1 and 12 as applicable. This application is made for and on behalf of the organisation identified above. I certify that I am empowered by the organisation to ensure that all activities undertaken by the organisation can be financed and carried out to the standard required by the Authority.
	I declare that to the best of my knowledge and belief the statements made and the information supplied in this application and the attachments are complete and correct.

Full Name of Chief Executive		Participant Number (if known)	
Signature		Date of application	

10. Applicant's Checklist – please take the time to check and complete this section

Please ensure all documents are enclosed. Applications which are incomplete or lacking any required documents will not be processed.	1. All necessary sections completed	<input type="checkbox"/>
	2. Completed rule compliance matrix enclosed	<input type="checkbox"/>
	3. Completed company exposition enclosed	<input type="checkbox"/>
	4. CA-FPP.V03 and CV for the nominated senior persons enclosed	<input type="checkbox"/>
	5. Additional attachments enclosed as per this list:	<input type="checkbox"/>



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Use this sheet if you need to provide further information or explanations that do not fit in the original sections of the form.

Section	Additional details or explanations

OFFICE USE ONLY		
1. Received by:	3. Receipt No:	5. Completed by:
2. Date Received:	4. Job No:	6. Certificate issue date: