



**Application for issue or renewal of a
Telecommunication Service Certificate CAR Part 171**

1. Organisation Details

(a) Legal name of organisation:	<i>The certificate will be issued in this name</i>				
(b) Trading or Division name:					
(c) Client No: (if known)					
(d) Postal Address: (Address for Service Ref Civil Aviation Act Section 48) Telephone:					
				Fax:	
(e) Business Address: (if different from above) Telephone:					
				Fax:	
(f) 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"/>
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3. Questionnaire

The following questions must be answered for initial issue and for renewal:	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"/>
<i>*If answering "Yes" please provide details on separate sheets.</i>		

4. Facility types applied for (Ref CAR Part 171.3 Definitions)

<input type="checkbox"/> ATIS	<input type="checkbox"/> HF A-G	<input type="checkbox"/> HF Data	<input type="checkbox"/> DME	<input type="checkbox"/> ADS	<input type="checkbox"/> FDPS
<input type="checkbox"/> VOLMET	<input type="checkbox"/> VHF A-G	<input type="checkbox"/> VHF Data	<input type="checkbox"/> ILS	<input type="checkbox"/> PAR	<input type="checkbox"/> RDPS
<input type="checkbox"/> VOLMET	<input type="checkbox"/> UHF A-G	<input type="checkbox"/> UHF Data	<input type="checkbox"/> MLS	<input type="checkbox"/> PSR	<input type="checkbox"/> RFDPS
<input type="checkbox"/> AFTN	<input type="checkbox"/> Selcal	<input type="checkbox"/> CPDLC	<input type="checkbox"/> NDB	<input type="checkbox"/> SSR	
<input type="checkbox"/> Direct Speech	<input type="checkbox"/> A-G Data	<input type="checkbox"/> G-G Data	<input type="checkbox"/> VOR		

5. List of Senior Persons and their areas of responsibility (ref CAR Part 171.51 (a) (2))

6. Number of Persons to be employed (Ref CAR Part 171.51(3))

1-5 <input type="checkbox"/>	6-10 <input type="checkbox"/>	11-50 <input type="checkbox"/>	51-100 <input type="checkbox"/>	>100 <input type="checkbox"/>
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Declaration

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.

Full name of (nominated) Chief Executive:

Signature of (nominated) Chief Executive:

Date of application:

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.*
- For initial issue or for a change of Senior Persons, separate form CAA FPP will need to accompany this application for each of the senior persons nominated in Section 5.*

The completed application together with the fee of K5,000 and supporting documentation, should be submitted to:

Deputy Director – Aviation Safety Regulation
Civil Aviation Authority
P O Box 684
BOROKO
Papua New Guinea

OFFICE USE ONLY

1. Received by: 2. Date Received: 3. Receipt No:
4. Work Request No: 5. Completed by: 6. Certificate issue date: