

APPLICATION FOR THE ISSUE OR RENEWAL OF AERONAUTICAL INFORMATION SERVICE CERTIFICATE UNDER RULE CAR PART 175

ISSUED FOR USE CA 175-01

Reference: CAR Part 175 Instructions: The completed application together with the Director Civil Aviation Safety Authority P.O Box 1941 BOROKO Papua New Guinea Notes: 1. The provision of false information under Section 304 of the Civil Aviation are gistered company, submit a company of a company of the	o or failure to iation Act 20 rtificate will copy of the o	o disclose inf 000 and is su be issued or company's o	formation ubject, in ally to a re	relevant the case egistered tificate of	to the g of a per compar Incorpo	rant or ho rson other ny, a partr ration.	olding of an aviation docu r than an individual, to a r nership, a sole trader or a	maximum fine of I In incorporated so	(100, 000. ociety. For
1. Organisation Details:									
(a) Legal name of organisation	1:								
		The	e certific	ate will	be issu	ed in this	s name		
(b) Trading or Division name:									
(c) Client No: (if known)									
(d) Postal Address:									
(Address for Service Ref Civil Aviation Act Sectio	n 48)					Fax:			
Telepl							•		
(e) Business Address:									
(if different from above)	-								
Telepl	hone:					Fax:			
(f) Your reference:									
(Order number/contact person or other reference)									
2. Reason for Application: <i>Mark appropriate box</i>									
Initial issue: Renewal:									
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?									
(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? *If answering "Yes", please provide details on separate sheets.									
4. Aeronautical Information Services to be provided.									
AIP Service									
NOTAM Service									
Pre-flight Information Service									
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5.	List of Senior Persons and their area of responsibilities (refer Part 175.51)

6. Personnel: refer Part 175.

Indicate numb	Indicate number of persons to be employed in the organisation.				
1.5	6-10	11-50	51-100	>100	
Indicate number of persons to be employed in the unit for which certification is sought.					
1-5	6-10	11-50	51-100	>100	

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:	