Air Traffic Service Certificate under CAR Part 172



Δ	nnlication	requirements	and instructions	for completin	a the form
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a) Please ensure all documents are enclosed. No application will be processed until all required documentation and applicable fees are received.

The CAA Standard Rate hourly charge applies. Follow the link for information on fees and charges.

- b) The application must include the amended exposition as required by rule 172.125.
- c) Current certificate holders seeking to implement a system for safety management must submit a completed Application for Approval of SMS Implementation Plan form <u>24100/01</u> with an SMS implementation plan. The deadlines to submit a plan and obtain certification are detailed in <u>Transition requirements</u>.
- d) Further notes and instructions are included in the grey margins of the different sections.
- e) 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

CAA Participant Number (if known)	Companies Of	fice No.
Legal Name of Organisation		
Trading or Division name (if any)		
Only fill this part of the section if changes are being made.		

Address for Service

The Civil Aviation Act, s8, requires applicants to provide an address for service in New Zealand (i.e. a physical address, not a P.O. Box) 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 –				
Details of the person who may be contacted for further information				
Name		Position		
Tel		Mobile		
Fax		Email		

2. What are you changing?

Indicate the change you are proposing in your organisation. More than one box may be ticked.	1. 2.	Address for service Trading name	
Complete the relevant sections of the form as indicated at far right.	3.	Nominated senior persons	Complete section 5
Sections 1, 2, 3, 6 and 7 are required for all	4.	Approved services	
applications. The line numbers align	5.	Training and assessment ratings	
with the section numbers on the Schedule of Conditions	6.	Training and assessment licences	Complete section 4
Conditions	7.	System for safety management	
		Other	

3. Exposition

List the exposition manual(s) required by	Manual Titles	Amendment No. and date
CAR 172.125 that are being amended for this		
proposed change		

4. Details of Change

Provide a summary of the changes you are proposing to make to your organisation

5. Senior Persons

Separate forms must accompany this application for <u>each</u> of the nominated senior persons as shown below. Form <u>CAA 24FPP</u> or <u>24FPPDEC</u>, <u>and</u> CV

Note also the transitional provisions related to SMS in Rule 172.451

Nominated persons area(s) of responsibility as per 172.51(a)		Name & company title	Participant No. (if known)	
Chief Executive				
Indicate any senior	Removed persons			
persons that are being removed from the				
organisation's certificate.				
	I hereby nominate the above person(s) for the responsibilities indicated.			
Signature of Chief Executive or Board Chairperson		Date		
6. Declaration by	Chief E	xecutive		

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 49 of the Civil Aviation Act 1990 and is subject, in	I have obtained a current copy of NZCAR Part 172 and AC172-1, AC172-2, and AC172-3, 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 in accordance with the requirements of the Civil Aviation Act 1990, Section 12.		
the case of a body corporate, to a maximum fine of \$50,000.	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	

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

Please ensure all	1.	All necessary sections completed	
documents are enclosed. Applications which are	2.	Amended company exposition enclosed	
incomplete or lacking	3.	CAA 24FPP/24FPPDEC and CV for the nominated senior persons enclosed	
any required documents will not be processed.	4.	*Form CAA 24100/01 enclosed (as applicable)	
*Applicants seeking to implement a system for safety management must include a form CAA 24001/01 with an implementation plan for SMS. Deadlines are detailed in <u>Transitional</u> <u>requirements</u> , Rule 172.451.	5.	Additional attachments enclosed as per this list:	

Submit the completed application together with the appropriate fee and supporting documentation to:

Manager Aeronautical Services Civil Aviation Authority, P O Box 3555, Wellington 6140, New Zealand <u>AeronauticalServices@caa.govt.nz</u>

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			