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***Part 175 application for issue or renewal of an aeronautical information service certificate***

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|  |  **PO No.** |  |
| Application requirements and instructions for completing the form1. *Please ensure all documents and applicable fees are enclosed. No application will be processed until all required documentation and applicable fees are received.Follow the link for information on* [*fees and charges*](http://www.caa.govt.nz/Legal_Information/CAA_Fees_and_Charges.pdf)*.*
2. *The application must include*

*- completed rule compliance matrix* [*24175-02*](http://www.caa.govt.nz/Forms/Forms.htm#Part_175) *and any other as applicable to your type of operation.**- a complete exposition as required by rule 175.69.*1. *Initial issue applications must submit a completed Safety management system evaluation tool (*[*24100-02*](https://www.aviation.govt.nz/about-us/forms/Filter/?SearchTerm=24100)*).*
2. *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.*1. *Further notes and instructions are included in the grey margins of the different sections.*
2. *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.*
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# Organisation Details

|  |  |  |  |
| --- | --- | --- | --- |
| **CAA 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***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)* |
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|        |       |
|        |       |
| Post Code |       | Post Code |       |
| Tel |       | Tel |       |
| Email |       | Email |       |
| **Your reference – or –**  |       |
| **Details of the person who may be contacted for further information** |
| Name |       | Position |       |
| Tel |       | Mobile |       |
| Email |       |

# Questionnaire

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| *These two questions must be answered for the initial issue and for the renewal of a certificate.* | 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? | [ ]  / [ ]  |
|  | 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? | [ ]  / [ ]  |
| **Note**  | If “Yes”, please provide details with this application on separate sheets. |

# Service Types Applied for

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| *Mark the appropriate boxes* |
| AIP Service | [ ]   | NOTAM Service | [ ]   | Pre-flight Information Service | [ ]   |

# Exposition

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| --- | --- | --- |
| *List the manuals that constitute the* ***exposition*** *required by CAR 175.69**For* ***renewal*** *list the publications already held by CAA and their latest amendment status.* | **Manual Titles** | **Amendment No. and date** |
|       |       |
|       |       |
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| *Also complete and submit the applicable* [*CAR Part 175 Rule Compliance Matrix*](http://www.caa.govt.nz/Forms/Forms.htm#Part_175) *to show compliance with the rule requirements in the exposition.* |

# Senior Persons

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| *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):****The appropriate fit and proper person form (*[*CAA 24FPP*](http://www.caa.govt.nz/Forms/24FPP.pdf) *or* [*24FPPDEC*](http://www.caa.govt.nz/Forms/24FPPDEC.pdf))*, and CV* |
| **Nominated persons area(s) of responsibility as per rule 175.51(a)** | **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 ofChief Executive or Board Chairperson** |  | **Date** |       |

# Number of Persons to be Employed (rule 175.51(a)(3))

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 1-5 [ ]   |  6-10 [ ]   | 11-50 [ ]   | 51-100 [ ]   | > 100 [ ]   |

# Exemptions

|  |  |
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| *List any exemptions you hold (list numbers and applicable rules).* |       |

# Declaration by Chief Executive

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| *The provision of false information or failure to disclose information relevant to the grant or holding of an aviation document constitutes an offence under sections 107 and 362 of the Civil Aviation Act 2023 and is subject, in the case of a body corporate, to a maximum fine of $100,000.* | I have obtained a current copy of NZCAR Part 175 and AC175-1, 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 in accordance with the requirements of the Civil Aviation Act 2023, section 13. |
|  | I declare that, to the best of my knowledge, the information supplied in this application and any documentation attached is true and correct.. |
| **Full Name ofChief Executive** |       | **Participant Number(if known)** |       |
| **Signature** |  | **Date of application** |       |

# Applicant’s Checklist – please take the time to check and complete this section

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| *Please ensure all documents are enclosed.* *Applications which are incomplete or lacking any required documents will not be processed.**\*Applicants applying for a new certificate must complete the Safety management system evaluation tool (24100-02)* | 1. All necessary sections completed
 | [ ]   |
| 1. Completed rule compliance matrix enclosed
 | [ ]   |
| 1. Completed company exposition enclosed
 | [ ]   |
| 1. Appropriate fit and proper person form (24FPP or 24FPPDEC) and CV for the nominated senior persons enclosed
 | [ ]   |
| 1. Form CAA 24100-02 enclosed (as applicable)\*
 | [ ]   |
| 1. 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****Aeronautical.Services@caa.govt.nz**

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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** |
|    |       |
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