



SECTION A: APPLICANT DETAILS

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|------------------------------|--------------------|---------------|
| Person/Company Name | Registered Address | ACN |
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| Names of Officers if Company | Postal Address | Telephone No. |
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SECTION B: OPERATIONAL DETAILS TO BE PROVIDED TO CASA WITH APPLICATION

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| Location of proposed Part 172 operation: |
| Air Traffic Service(s) to be provided: |
| |
| Daily hours of service: |
| Proposed commencement date: |
| Organisation Chart: Provided Yes / No |
| Operations Manual: Provided Yes / No |
| Are facilities installed and operative? Yes / No |
| Has staff been engaged? |
| Can services be demonstrated? |
| <i>Documentary evidence in support of all matters in this application may be requested</i> |

SECTION C: LIST OF NON-COMPLIANCES WITH CASR 172

| Reference (Attach list if insufficient space) | Details and reason for non-compliance |
|--|---------------------------------------|
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SECTION D: DECLARATION

On behalf of _____ ,
I hereby apply for CASA approval as an ATS Approved Provider.
Signed: _____
My authority to act on behalf of the applicant is: _____
Name of person making the declaration: _____
Date: ____/____/____

Please send material relating to this application by email: Yes No
I am aware of, and accept, the risk that information sent via email may be intercepted and read during transmission, not delivered or modified. (If you do not accept the risk, material will be sent by post.)
For information on CASA's Privacy Policy, please visit <http://www.casa.gov.au/tools/privacy/index.htm>
The Federal Government TimeSaver initiative aims to assess the time taken to complete Government forms. Please indicate the approximate time taken to complete this form. Hrs Mins