

# APPLICATION TO BECOME A GROUND SERVICE PROVIDER

SF102E

### Please read carefully before filling in the form.

• If you wish to be certified as a Ground Handling Service Provider

You should fill in this form.

Please print clearly in black/Blue ink • Please the relevant boxes.

• Have you applied for certification before? Yes No If **Yes**, please give details including allocated number, on a separate sheet.

Are you a registered company? Yes No

If Yes, please complete Part A. If No, please complete Part B (overleaf).

## PART A

Company Name		
Registration No		
Trading as		
VAT Reg No.		
Registered Office Address	Postcode	•
Telephone No.	Fax No.	

#### \*Please attach an address list of all premises where you operate from.

How many staff do you employ in your company for AVSEC operational duties? i.e. acceptance, preparation, packing & delivery.

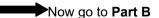
0-25 26-50 51-75 76-100 100+

Does any member of your company have any criminal convictions?

No

Yes

If **Yes** please attach full details on a separate sheet



## PART B

## Are you?

## (a) a sole proprietor

Full name	
Trading as	

## or (b) a partnership or association

Full names of all partners or associates		
Continued on a separate sheet		
Trading as		
For (a) or (b)		
VAT Reg No.		
Address of principal office	Postcode	
Telephone No.	Fax No.	

# \*Please attach an address list of all premises where you operate from.

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Does any mem	ber of your company h	nave any criminal convict	tions?	Yes	No	
0-25	26-50	51-75	76-100	1	00+	
How many staf	f do you employ in you	ir company for AVSEC o	perational duties?			



## PART C

Please give details of the individual in your company who will officially accept any written or verbal communication from the Authority relating to aviation security business.

Name		
Position in Company		
Official address		
Telephone No.	Postcode	
	Fax No.	

## PART D

## Now please sign and date the form

I declare that the information I have given is, to the best of my knowledge true and correct.

Signed:	Date:	
Name(CAPITAL LETTERS)		
Position in Company		

## Now return the completed application form together with the following:

- Ground Handling Service Provider Security Programme
- Aircraft Maintenance Organisation Certificate
- Quality Assurance System and Safety Management System
- Copy of Air Operator's Certificate if applicable

## then send it to: Controller Aviation Safety & Security Civil Aviation Authority of Fiji Private Mail Bag Nadi Airport

## For Office Use Only

Date application received			
New application?	Yes	No	
Re-application after refusal?	Yes	No	
Renewal	Yes	No	
Date sent to CAAF			
Date received at CAAF			
Date of listing			
Allocated Number			
Date of renewal			
Date application refused			

Date refusal notified to applicant