

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? Yes No

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

➡ Now go to Part B

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.***

How many staff do you employ in your company for AVSEC operational duties?

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

Does any member of your company have any criminal convictions? Yes No

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



Now go to **Part C**

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:

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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

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New application?

Yes

No

Re-application after refusal?

Yes

No

Renewal

Yes

No

Date sent to CAAF

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Date received at CAAF

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Date of listing

--

Allocated Number

--

Date of renewal

--

Date application refused

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Reason for refusal

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Date refusal notified to applicant

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