

APPLICATION FOR AN OPERATING LICENCE

Under the Civil Aviation Authority Regulations 1991, as amended, and to the Authority's Official Record Series 1.



This form can be filled in on screen (preferred method) then printed, signed and submitted as instructed. Alternatively, print, then complete in BLOCK CAPITALS using black or dark blue ink

FOR INTERNAL USE ONLY

APPLICATION NUMBER: DATE RECEIVED:

FALSE REPRESENTATION STATEMENT

Section 67(6) of the Civil Aviation Act 1982 makes it an offence to provide false information for the purpose of obtaining a licence.

The Authority is required by Regulation 16(3) to make a copy of each application available at its office for inspection and, in normal circumstances, to publish details of the application in its Official Record Series 2.

1. APPLICANT DETAILS This application will be considered in respect of and, if appropriate, granted to, the Company Name as registered under the Company Number provided on this form.

a) A Company

Registered Company Name (in full):
Registered Company Number:
Country of Company Registration:
Registered Office Address:
..... Postcode:
Telephone: E-mail:
Trading Name: (if applicable)
Trading Address (primary site):
Country Postcode:
Website address:

Authorised Representative of Company

This application is to be signed by either a Director or Company Secretary or a person authorised by the Board to act on behalf of the Company.

Title: Forename: Surname:
Position in Company:
Telephone No: E-mail:

If you are not a Director or Company Secretary and have been authorised to sign the application form on behalf of the Company, proof of that authority must be provided with the completed application form.

This application will be considered in respect of and, if appropriate, granted or issued to, the applicant(s) named below.

b) Individual (including sole traders and partnerships)

Title: Forename: Surname:
Date of birth (dd/mm/yyyy): Nationality:
Town of birth: Country of birth:
Permanent Address:
Country Postcode:
Telephone: Mobile telephone:
Trading Name: (if applicable)
Website address:
E-mail:

A certified copy of your Passport, EAA/EU National Identity Card or Full Photographic Driving Licence (see Guidance Note 1) must accompany your application as proof of identification if this is your FIRST application. In the case of a partnership, please complete details of all partners. Continued on a separate sheet

2. OPERATING LICENCE TECHNICAL INFORMATION

Principal operating base:

Is the application for a Type A or a Type B Operating Licence? (see the Official Record Series 1 for description of licence types.)

What date is the licence required to be effective?:

Do you hold an AOC? If yes, please give number: if no, have you applied for one? Yes No

Number and type of aircraft currently employed:

Number of Aircraft	Aircraft Type

Do you operate, or intend to operate, any aircraft with more than 10 tonnes maximum take off weight or more than 19 seats? If yes, please specify.

Number of Aircraft	Aircraft Type

Nature of air transport service operated or proposed:

Is air transport your principle activity, or will it be your principle activity if a licence is granted? Yes No

If no, please give details on a separate sheet.

3. COMPANY INFORMATION

(The questions below on registration, shareholdings and directors apply only to applicants which are incorporated companies. Any other applicants, such as sole traders or partnerships, are requested to provide details of ownership and management on a separate sheet enclosed.)

Registered Address:

Date and place of incorporation:

Company registration number:

3.1 SHAREHOLDERS

Please list below details of each person or company holding more than 5% of the total issued shares in the applicant. In the case of nominee holdings, indicate the name of the beneficial holder of the shares.

FULL NAME OF SHAREHOLDER	NATIONALITY	NUMBER OF SHARES	CLASS OF SHARES	% OF TOTAL ISSUED

Name of parent company (if any):

Date of incorporation of parent company (if applicable):  Document Sharing Hub