

Application to add or remove, temporary or permanent Line Stations (Line Maintenance Facilities) to/from an approval.



Not required for Occasional Line Maintenance (less than ten consecutive days).

Please complete this form electronically (preferred method) then print, sign and submit as instructed.

Alternatively, print, then complete in BLOCK CAPITALS using black or dark blue ink.

FALSE REPRESENTATION STATEMENT

It is an offence under Article 256 of the Air Navigation Order 2016 to make, with intent to deceive, any false representation the purpose of procuring the grant, issue, renewal or variation of any certificate, licence, approval, permission or other document. This offence is punishable on summary conviction by a fine and or up to two years imprisonment.

1a. Applicant Details - An 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:
E-mail:
Trading Name: (if applicable)
Website address:

A certified copy of your Passport, EAA/EU National Identity Card or Full Photographic Driving Licence must accompany your application as proof of identification if this is your FIRST application.

In the case of a partnership, please provide complete details of all partners in Box 8.

1b. Applicant Details - A Registered Company

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

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 to, the company registered under the Company number provided on this form.

1.c Applicant Details - An Unincorporated Association or other body

Name of Unincorporated Association or other body:

Address:

Country: Postcode:

Telephone: Fax:

E-mail:

Website address:.....

Authorised Representative of Unincorporated Association or other body

This application is to be signed by a person or persons authorised by the body named above to act on behalf of it. This should normally be a member or members of the managing committee of the association or other body. Evidence of the authorisation to act on behalf of the association or body should be provided with the application.

Title: Forename: Surname:

Position in Company:

Telephone No: E-mail:

Charity Number (if applicable):

This application will be considered in respect of and, if appropriate, granted to, the company registered under the Company number provided on this form.

2. Line Stations to be added or removed (copy and attach this page for more than three changes)

CAA Approval Number: Bilateral Approval Number(s):

Add a Line Station (Please complete section 3)

Remove a Line Station

Line Station airport: Line Station country:

Is your Bilateral Approval applicable at this location? Yes No Bilateral country:

Add a Line Station (Please complete section 3)

Remove a Line Station

Line Station airport: Line Station country:

Is your Bilateral Approval applicable at this location? Yes No Bilateral country:

Add a Line Station (Please complete section 3)

Remove a Line Station

Line Station airport: Line Station country:

Is your Bilateral Approval applicable at this location? Yes No Bilateral country:

Please provide a copy of your updated Exposition with Line Stations added or removed as required for approval.