

Application for Issue or Renewal of an Adventure Aviation Operator Certificate Under Civil Aviation Rules, Part 115

Application requirements and instructions for completing the form

- a) The CAA Standard Rate hourly charge applies. Follow the link for information on [fees and charges](#). NOTE: If an organisation is being invoiced, you MUST obtain the details AND signature of the person authorising the payment in Section 2.
- b) Please ensure all documents and applicable fees are paid. No application will be processed until all required documentation and applicable fees are received.
- c) The application must include
 - completed rule compliance matrix [24115-02](#) and any other as applicable to your type of operation.
 - a complete exposition as required by rule 115.79.
- d) Applications must be received, with all completed information
 - for initial issue at least 90 days prior to intended operation;
 - for renewal at least 60 days prior to certificate expiry.
- e) Further notes and instructions are included in the grey margins of the different sections.
- f) Use additional sheets such as those included at the end of the form to provide further details and explanations that do not fit in the original sections of the form.
- g) **Submit the completed application and supporting documentation to either:**
 Email: certification@caa.govt.nz
 Post: Certification Unit, Civil Aviation Authority, PO Box 3555, Wellington 6140

1. Organisation Details

CAA Participant Number (if known)	<input type="text"/>	Companies Office No.	<input type="text"/>
Legal Name of Organisation	<input type="text"/>		
<p>A certificate will be issued only to a registered company, a partnership, a sole trader or an incorporated society. For a registered company, submit a copy of the Companies Office Certificate of Incorporation for initial issue or for an amendment involving a change to the legal name of the organisation.</p>			
Trading name (if any)	<input type="text"/>		
Address for Service	Postal Address		
<i>The Civil Aviation Act, s8, requires applicants to provide an address for service in New Zealand (i.e. a physical address, not a P.O. Box) and to promptly notify the Director of any changes.</i>	<i>(if different from Address for Service)</i>		
<input type="text"/>	<input type="text"/>		
<input type="text"/>	<input type="text"/>		
<input type="text"/>	<input type="text"/>		
Post Code	<input type="text"/>	Post Code	<input type="text"/>
Tel	<input type="text"/>	Tel	<input type="text"/>
Email	<input type="text"/>	Email	<input type="text"/>
Your reference – or –	<input type="text"/>		
Details of the person who may be contacted for further information			
Name	<input type="text"/>	Position	<input type="text"/>

Tel		Mobile	
Email			

2. Details for Invoice

Please provide the name of the organisation or applicant and address for the invoice to be sent. If an organisation is being invoiced, you MUST obtain the details AND signature of the person authorising payment.

The invoice is to be sent to:	<input type="checkbox"/> Applicant	<input type="checkbox"/> Organisation
Applicant or Organisation Name:		CAA Participant No: <input type="text"/>
Name of the person authorising payment: <i>(If applicant, N/A)</i>		Purchase Order No: <i>(If applicable)</i> <input type="text"/>
Title/Position within the company:	<input type="text"/>	
Email:	<input type="text"/>	Phone: <input type="text"/>
Postal Address: <i>(For the invoice to be sent to individual or organisation)</i>	<input type="text"/>	
	<input type="text"/>	
	<input type="text"/>	
	<input type="text"/>	
	<input type="text"/>	
Signature: <i>(Of the applicant or person within the organisation authorising payment)</i>	<input type="text"/>	

3. Questionnaire

<i>These two questions must be answered for the initial issue and for the renewal of a certificate.</i>	Has the organisation been convicted for any transport safety offence in the last five years or is the organisation presently facing charges for a transport safety offence?	Yes / No
	Has the organisation previously had an application for an aviation document rejected or has an aviation document held by the organisation been suspended or revoked?	Yes / No
Note <i>If "Yes", please provide details with this application on separate sheets.</i>		

4. Adventure Aviation Types of Operation

<i>Identify the type of operation. More than one box may be ticked</i>	A to A Standard <input type="checkbox"/>	A to A Special <input type="checkbox"/>	A to A Microlight <input type="checkbox"/>
	Hot Air Balloon <input type="checkbox"/>	Parachute Drop <input type="checkbox"/>	Tandem Parachute <input type="checkbox"/>
	Hang Glider <input type="checkbox"/>	Para Glider <input type="checkbox"/>	Glider <input type="checkbox"/>

5. Proposed Locations of Operation

May be supported with drawings or maps.

6. Proposed Routes and Geographical Areas of Operations

May be supported with drawings or maps.

7. Crew Training and Competency Assessment

List any organisations you intend to **contract** training to.

Confirm with the contractor that their CAR Part 141 certificate authorises them to conduct the courses or assessments.

Name and address	Participant No. (if known)
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8. Training Courses and / or Training Assessments Applied For

List the training courses and assessments that require acceptance by the CAA if exercised under your CAR Part 115 certificate by marking the appropriate boxes, if applicable.

Courses	Remarks
<input type="checkbox"/> Crew training – 115	
<input type="checkbox"/> Ground crew training	

Assessments	Remarks
<input type="checkbox"/> Operational competency – Part 115 ops.	

9. Exposition

List the manuals that constitute the **exposition** required by CAR 115.79

For **renewal** list the publications already held by CAA and their latest amendment status.

Manual Titles	Amendment No. and date

Also complete and submit the applicable [CAA Part 115 Rule Compliance Matrices](#) to show compliance with the rule requirements in the exposition.

10. Aircraft to be Used (Includes Parachutes)

List the aircraft you wish to operate. Please also indicate any aircraft that are being removed from the organisation’s operations specifications.

When adding an aircraft, enclose the relevant associated exposition amendments (e.g. operations, maintenance manuals) with your application.

Add or Remove	Registration or ID mark	Manufacturer	Model	Are you the registered operator?
Add / Remove				Yes / No

Add / Remove				Yes / No
Add / Remove				Yes / No

Notes: If the unique ID (identification) mark is unknown use supplemental form [24115/01A](#) to request an identification mark.
If you are disposing of a parachute, hang glider or paraglider (rendering it unairworthy), you must inform the CAA Aircraft Registrar in writing (letter or email), indicating the serial number and ID mark.
If you are selling or handing over possession of a parachute, hang glider or paraglider to another person, you must notify the change of possession by submitting form [24115/01B](#).

11. Maintenance

List any maintenance organisations or persons (LAME, licensed engineer) you intend to contract the maintenance of your aircraft to.

Registration or ID mark	Name and Address	Participant No. (if known)

12. Maintenance Programme

List the maintenance programmes that will apply to the aircraft operated by your organisation.

Registration or ID mark	Document / Programme Title	Has the CAA approved them?*
		Yes / No
		Yes / No
		Yes / No

***Note:** Any programme that has not been approved must be submitted to the CAA for assessment and approval as per 91.605(a)(1).

13. Senior Persons

Separate forms must accompany this application for each of the nominated senior persons as shown below.

Initial issue:

Form [CAA 24FPP](#) or [24FPPDEC](#), and CV

Renewal:

- Changed persons:
Form [CAA 24FPP](#) or [24FPPDEC](#), and CV

- Unchanged persons:
Their names and titles must be confirmed in this section and form [CAA 24FPP](#) or [24FPPDEC](#) with an accompanying CV must be included.

Nominated persons		Name & company title		Participant No. (if known)
Chief Executive	Name			
	Title			
Adventure aviation operations, including flight operations and supporting ground operations	Name			
	Title			
Licence / Certificate No.		Certificate Type		
Ratings	Aeroplanes			Commercial Tandem Master <input type="checkbox"/>
	Helicopters			NZHGPA Certificate <input type="checkbox"/>
Hours	P-in-C single engine		P-in-C glider	
	P-in-C multi engine		P-in-C microlight	
	P-in-C helicopters		P-in-C float plane	
	Tandem master descents		P-in-C hang glider/paraglider	
	P-in-C hot air balloon		Total flying time	
Crew training		Name		Participant No.
		Title		
Licence / Certificate No.		Certificate Type		
Ratings	Aeroplanes			Commercial Tandem Master <input type="checkbox"/>

Helicopters		NZHGPA Certificate <input type="checkbox"/>	
Hours	P-in-C single engine		P-in-C glider
	P-in-C multi engine		P-in-C microlight
	P-in-C helicopters		P-in-C float plane
	Tandem master descents		P-in-C hang glider/paraglider
	P-in-C hot air balloon		Total flying time
Crew assessment	Name		Participant No.
If different from training	Title		
Licence / Certificate No.		Certificate Type	
Ratings	Aeroplanes	Commercial Tandem Master	<input type="checkbox"/>
	Helicopters	NZHGPA Certificate	<input type="checkbox"/>
Hours	P-in-C single engine		P-in-C glider
	P-in-C multi engine		P-in-C microlight
	P-in-C helicopters		P-in-C float plane
	Tandem master descents		P-in-C hang glider/paraglider
	P-in-C hot air balloon		Total flying time
Control and scheduling of maintenance	Name		Participant No.
	Title		
Safety Management	Name		
	Title		
Conducting occurrence investigations	Name		
	Title		
I hereby nominate the above person(s) for the responsibilities indicated.			
Signature of Chief Executive or Board Chairperson	<div style="border: 1px solid black; width: 200px; height: 30px;"></div>	Date	<div style="border: 1px solid black; width: 100px; height: 30px;"></div>

14. Exemptions

List any exemptions you hold (list numbers and applicable rules).

15. Declaration by Chief Executive

The provision of false information or failure to disclose information relevant to the grant or holding of an aviation document constitutes an offence under Section 49 of the Civil Aviation Act 1990 and is subject, in the case of a body corporate, to a maximum fine of \$50,000.

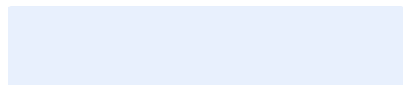
I have obtained a current copy of NZCAR Part 115 and AC115-1, and have read and understood the contents as they apply to this application. I also have a current copy of CAR Parts 1 and 12 as applicable.

This application is made for and on behalf of the organisation identified above. I certify that I am empowered by the organisation to ensure that all activities undertaken by the organisation can be financed and carried out in accordance with the requirements of the Civil Aviation Act 1990, Section 12.

I declare that to the best of my knowledge and belief the statements made and the information supplied in this application and the attachments are complete and correct.

Full Name of Chief Executive

	Participant Number (if known)
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Signature		Date of application	<input type="text"/>
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16. Fees and Charges

Initial issue:	<p>A minimum charge of four hours at the prevailing standard hourly rate is <u>payable in advance for applications for initial issue only</u>.</p> <p>The charge is credited towards the total and a final adjustment will be made on completion of certification. The additional charge is at the prevailing standard hourly rate for the time taken to assess and process the application. Follow the link for information on fees and charges. <u>Ensure section 2 of this form is completed.</u></p>
Renewal:	<p>Charge at the prevailing standard hourly rate for the time involved. An advance payment is not required. <u>Ensure section 2 of this form is completed.</u></p>
Pay by bank transfer:	<p>Civil Aviation Authority Westpac, Lower Hutt</p> <p>03-0531-0406878-00</p> <p>Particulars: Invoice or receipt number (if known), or rule part number applied for (e.g., 119Cert) Code: CAA Participant Number (if known) Reference: Aircraft Registration Mark, Organisation or Name (as applicable)</p>
Pay by credit card:	<p>To pay by credit card, please contact the CAA on (04) 560 9400 and ask for Finance. Do not send cash or cheques. Do not send credit card details via email.</p>

17. Applicant's Checklist – please take the time to check and complete this section

<p>Please ensure all documents are enclosed. Applications which are incomplete or lacking any required documents will not be processed.</p> <p>*Applicants for a new certificate must include a form CAA 24001/01 with an implementation plan for SMS.</p>	1. All necessary sections completed	<input type="checkbox"/>
	2. Completed rule compliance matrices enclosed	<input type="checkbox"/>
	3. Completed company exposition enclosed	<input type="checkbox"/>
	4. Maintenance programmes that require approval enclosed	<input type="checkbox"/>
	5. CAA 24FPP/24FPPDEC and CV for the nominated senior persons enclosed	<input type="checkbox"/>
	6. *Form CAA 24100/01 enclosed (as applicable)	<input type="checkbox"/>
	7. Operator statement as per CAR 47.55(d) is amended to reflect details in this application	<input type="checkbox"/>
	8. Payment made (as applicable)	<input type="checkbox"/>
	9. Purchase order number (optional)	<input type="checkbox"/>
	10. Additional attachments enclosed as per this list:	<input type="checkbox"/>

Use this sheet if you need to provide further information or explanations that do not fit in the original sections of the form.

Section	Additional details or explanations