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***Part 173 application for issue or renewal of an instrument flight procedure service certificate***

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|  |  **PO No.** |  |
| Application requirements and instructions for completing the form1. *Please ensure all documents and applicable fees are enclosed. No application will be processed until all required documentation and applicable fees are received.Follow the link for information on* [*fees and charges*](http://www.caa.govt.nz/Legal_Information/CAA_Fees_and_Charges.pdf)*.*
2. *The application must include*

*- completed rule compliance matrix (*[*24173-02*](http://www.caa.govt.nz/Forms/Forms.htm#Part_173)*) and any other as applicable to your type of operation**- a complete exposition as required by rule 173.71.*1. *Applicants for initial issue must submit a completed Safety management system evaluation tool (*[*24100-02*](https://www.aviation.govt.nz/about-us/forms/Filter/?SearchTerm=24100)*).*
2. *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.*1. *Further notes and instructions are included in the grey margins of the different sections.*
2. *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.*
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# Organisation Details

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| **CAA Participant Number** (*if known)* |  | **Companies Office No.** |  |
| **Legal Name of Organisation**  |  |
| *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.* |
| **Trading or Division name** *(if any)* |  |
| **Address for Service***The Civil Aviation Act 2023, section 73, 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.* | **Postal Address** *(if different from Address for Service)* |
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|        |       |
| Post Code |       | Post Code |       |
| Phone |       | Phone |       |
| Email |       | Email |       |
| **Your reference – or –**  |       |
| **Details of the person who may be contacted for further information** |
| Name |       | Position |       |
| Phone |       | Email |       |

# Questionnaire

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| *These two questions must be answered for the initial issue and for the renewal of a certificate.* | 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? | [ ]  / [ ]  |
|  | 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? | [ ]  / [ ]  |
| **Note**  | If “Yes”, please provide details with this application on separate sheets. |

# Instrument Flight Procedures to be Provided (Ref ICAO Doc 8168 Vol II Categories)

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| *Mark the appropriate boxes* |
| Conventional instrument procedures\* (Part II) | [ ]   | RNAV and satellite-based procedures\* (Part III) | [ ]   |
| Helicopter procedures\* (Part IV) | [ ]   | ATC lateral separation procedures (CAR Part 172) | [ ]   |
| \* Including associated IFR significant fixes, points and meteorological minima |

# Exposition

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| *List the manuals that constitute the* ***exposition*** *required by CAR 173.71**For* ***renewal*** *list the publications already held by CAA and their latest amendment status.* | **Manual Titles** | **Amendment No. and date** |
|       |       |
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| *Also complete and submit the applicable* [*CAR Part 173 Rule Compliance Matrix*](http://www.caa.govt.nz/Forms/Forms.htm#Part_173) *to show compliance with the rule requirements in the exposition.* |

# Exemptions

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

# Senior Persons

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| *Separate forms must accompany this application for each of the nominated senior persons as shown below.* |
| ***For both initial issue and renewal applications (for changed and unchanged persons):****For persons applying to be a fit and proper person: the appropriate application form (*[*24FPP*](https://www.aviation.govt.nz/about-us/forms/Filter/?SearchTerm=24FPP)*) and supporting documents**For persons already considered fit and proper: the appropriate declaration form (*[*24FPPDEC*](https://www.aviation.govt.nz/about-us/forms/Filter/?SearchTerm=24FPPDEC)*) and CV* |
| **Nominated persons area(s) of responsibility as per rule 173.51(a)** | **Name & company title** | **Participant No.**(if known) |
| **Chief Executive** |       |       |
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| *Indicate any senior persons that are being removed from the organisation’s certificate.* | **Removed persons** |
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|  | I hereby nominate the above person(s) for the responsibilities indicated. |
| **Signature ofChief Executive or Board Chairperson** |  | **Date** |       |

# Declaration by Chief Executive

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| *The provision of false information or failure to disclose information relevant to the grant or holding of an aviation document constitutes an offence under sections 107 and 362 of the Civil Aviation Act 2023 and is subject, in the case of a body corporate, to a maximum fine of $100,000.* | I have obtained a current copy of NZCAR Part 173 and AC173-1, 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 2023, Section 13. |
|  | I declare that, to the best of my knowledge, the information supplied in this application and any documentation attached is true and correct. |
| **Full Name ofChief Executive** |       | **Participant Number(if known)** |       |
| **Signature** |  | **Date of application** |       |

# Applicant’s Checklist – please take the time to check and complete this section

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| *Please ensure all documents are enclosed.**Applications which are incomplete or lacking any required documents will not be processed.**\*Applicants applying for a new certificate must complete the Safety management system evaluation tool (24100-02)*  | 1. All necessary sections completed
 | [ ]   |
| 1. Completed rule compliance matrix enclosed
 | [ ]   |
| 1. Completed company exposition enclosed
 | [ ]   |
| 1. Fit and proper form and supporting documents for the nominated senior persons enclosed
 | [ ]   |
| 1. The safety management system evaluation tool (24100-02) enclosed (initial only)\*
 | [ ]   |
| 1. Additional attachments enclosed as per this list:
 | [ ]   |
|       |  |

**Submit the completed application together with the appropriate fee and supporting documentation to:**

**Aeronautical.Services@caa.govt.nz**

or post to **Manager Aeronautical Services
Civil Aviation Authority
PO Box 3555
Wellington 6140**

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| *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** |
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