



DEPARTMENT OF TRANSPORT

Air Safety Investigation/Air Transport Regulation Division

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P O BOX 1489
PORT MORESBY NCD
PAPUA NEW GUINEA

**COMMERCIAL AIR SERVICE LICENCE
APPLICATION FOR RENEWAL**

I,.....
(Name in full & Position in Organization)

hereby apply for renewal of the Commercial Air Service Licence No
currently on issue to

.....
(Name & Postal Address)

SECTION 1

1.1 Organization

(a) Has there been any change in the control or structure of your organization since your licence was last issued/renewal?
(if "yes") please attach schedule showing full details.

1.2 (a) is insurance coverage held in respect of all charter operations involving the carriage of passengers and baggage in accordance with the provisions of the Civil Aviation (Aircraft Operator's Liability) Act 1975?
(if "yes") please attach copy policy).

(b) Give details of insurance held as per (a) above.

- i) Insurer:
- ii) Policy No:
- iii) Date of Expiry:

- (c) Provide documentary evidence from your insurers, that the Hull and Liability Insurance covering your aircraft listed in 2.1 below is current and not in dispute.

SECTION 2

2.1 Aircraft

- (a) Give details of all aircraft to be used on proposed operations. Where possible, registration markings and registered owner should be shown. In all other cases show the aircraft type only (eg: where aircraft are cross hired for short periods).

Aircraft Type	Registration Marking	Registered Owner
(If space insufficient, please attached schedule)		

- (b) The following aircraft types on the existing licence are no longer required and may be deleted.

2.2 Maintenance

Name of organization nominated to perform maintenance on your aircraft in respect of:

- a) Airframe
- b) Engine
- c) Electrical
- d) Instrument
- e) Radio

2.3 PILOTS

- (a) RPT and Charter Operations

Name of Pilot:

2.4 Emergency Equipment

- (a) Do all aircraft operate in accordance with the terms of your Air Service Licence and carry emergency equipment as prescribed under Papua New Guinea Legislation?

- (b) Has there been any change since your licence was last issued/renewed to type, manufacture or contents of emergency equipment carried, in respect of:

- i) Location Beacon

- ii) Life Jackets

- iii) Lift Raft

- iv) Survival Kit

- v) First Aid Kit

(if "Yes", attached details separately).

I certify that all statements in this application are true and correct in every particular.

Print Name:

Signature:

Designation:

Date: