SOUTH AFRICAN
CIVIL AVIATION AUTHORITY

Section/division: **Air Traffic Services**
Telephone number: **011-545-1000** *Fax Number:* **011-545-1282**
Physical address: **Ikhaya Lokundiza, 16 Treur Close, Waterfall Park, Bekker Street, Midrand, Gauteng**
Postal address: **Private Bag X73, Halfway House 1685** *Website:* **www.caa.co.za**

Form Number : CA 172 - 02

DETAILS OF BANK ACCOUNT FOR PAYMENT OF PRESCRIBED FEE			
Bank: **Standard Bank of SA Ltd**	*Branch:* **Brooklyn, Pretoria**	*Branch Code:* **011245**	*Account Number:* **013007971**

COMPULSORY CLIENT PAYMENT CODE (to be completed on deposit slip)		
Service/transaction	***Over the counter payments***	***EFT, Internet, Wire, Electronic payments***
ATSU APPROVAL / Fees: See CAR Part 187.00.27		

APPLICATION FOR ISSUE, AMENDMENT or RENEWAL of ATSU APPROVAL

PART 1: TO BE COMPLETED IN FULL

Full name:	
Trade name:	

Legal status of applicant/holder (individual/close corporation/company/trust/other – specify):

Registration number in the case of a close corporation/company/trust:	
Business address:	
Postal address:	
Postal code	

Telephone number:		Telefax number:	
Cellular number:		E-mail address:	
Approval number:		Expiry date:	

Full particulars in respect of the individual/each responsible director/shareholder/partner/member/office bearer:

Name	Position	Identity number	Nationality	Country of permanent residence

Type of air traffic service/s applied for: **(Indicate with an X)**

AD		ACC		Issuing of an ATSU approval	
APP		ACC Radar		Amendment of an ATSU approval	
APP Radar		FIS		Renewal of an ATSU approval	
ATS Training		AFIS			

Note: Manual of Procedure to be attached

Name of ATSU:	
Particulars of issue / amendment / renewals applied for:	

The applicant/holder declares hereby that the particulars provided in this application are true in every respect:

SIGNATURE OF APPLICANT	**NAME IN BLOCK LETTERS**	**DATE**
FOR OFFICIAL CAA USE ONLY:	Receipt number:	
SIGNATURE OF AUTHORISED OFFICER	**NAME IN BLOCK LETTERS**	**DATE**