



Application for approval as an Air Transport Sales agents

New Application

Variation/ Amendment

Reason for variation: i) Additional Air carrier(s)
 ii) Information change
 iii) Other (specify)

Approval Number (if apply for variation):

1. IDENTIFICATION OF AGENCY/AIR CARRIER

- a) Legal Name:
- b) Trade Name: *(if different from (a))*
- c) Contact Address: *(include phone number(s), E-mail, URL, etc)*

- d) Postal Address: *(if different from (c))*

- f) Registration number of the company:

- g) Date of Registration:
** Attach copies of certificate of registration, memorandum and articles of association of the company*

2. BUSINESS ENTITY AND FINANCIAL INFORMATION

- a) Registered capital:
- b) Paid-up capital:
- c) Are you a:

Air operator registered in Maldives

Sole proprietorship

Partnership

Private limited company

Public limited company

Others (specify)

c) Name(s) of owner/shareholders:

d) Financial interest % (*i.e. shareholding*)

e) Name and titles of principal directors/officers:

3. **SPECIFIC INFORMATION** (*if applying to act as Sales Agent of an air carrier*)

a) Give full name and address of air carrier you wish to act as sales agent:

Air carrier 1:

Air carrier 2:

b) Approval sought as:

Air Carrier 1:	General Sales Agent	Passenger Sales Agent	Cargo Sales Agent
Air Carrier 2:	General Sales Agent	Passenger Sales Agent	Cargo Sales Agent

** Attach a copy of the agreement between your company and the air carrier along with the letter of appointment
* If additional space is required for this item, attach additional sheets of paper*

4. STAFF

Give name(s), position or title and work experience of full time and/or part-time staff members (in reference to clause 2.5 (a) of the Rules Governing Air Transport Sales in the Maldives) who will be employed in the agency and who are qualified and competent to sell international air transportation. Please attach relevant training certificate(s).

5. PREMISES OF AGENCY/AIR CARRIER LOCATION

a) Give name, contact/postal address of the agency location for which approval sought (*include phone number(s) and E-mail*);

b) What are the normal business hours and days of the week that the office is open?

c) Is the agency located in the premises of a commercial firm or organization?

Yes

No

If yes

d) Give a brief description of other works carried out in the premises:

6. SECURITY OF TRAFFIC DOCUMENTS AND THE LOCATION/PREMISE

Applicants will be required to provide evidence at the time of inspection that they meet the requirements for security of traffic documents and the premises as stipulated in clause 2.5 (c) of the Rules Governing Air Transport Sales in the Maldives.

a) Is there Video Surveillance (CCTV) in operation in/around the premises?

Yes

No

7. OTHER INFORMATION (if applying to act as Sales Agent of an air carrier)

a) Are you a Computer Reservation System (CRS) Subscriber: Yes No

If no

b) Who will provide you with CRS facilities:

c) Give name(s) of participating GDRS in the CRS you will be using:

d) Are you an IATA approved agent: Yes No

If yes

e) Specify approval: GSA PSA CSA

Others (specify)

f) Give IATA Numeric Code and the date this was granted:

(Attach a copy of approval certificate)

g) Are you a travel agent: Yes No

If yes

h) Give the registration number:

i) Date of Registration:

j) Date travel agency was opened:
(Attach a copy of certificate of registration)

k) Do you represent any air carrier in the Maldives: Yes No

If yes:

l) Give the name(s) of air carrier(s) you currently represent and precise functions you perform:

I hereby certify that the foregoing statements (including statements made in attachment hereto) are true and correct to the best of my knowledge and belief, and that I am authorized by the company identified in 1(a) to make these statements and file this document.

Signature:

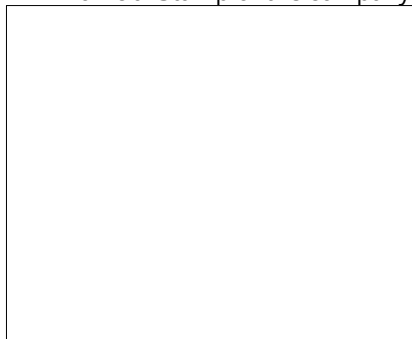
Name of applicant:

Contact (*phone number, E-mail*):

Position/Title:

Date:

Affix official Stamp of the company



SUBMISSION AND PAYMENT INSTRUCTION

- Submit the completed application form to Maldives Civil Aviation Authority, together with “application processing fee” MVR/US \$ being payable in accordance with Air transport Circular: AT 02/07
- Cheques should be made payable to ‘Maldives Civil Aviation Authority’ and cheques should be drawn on a bank in the United States of America or a bank in the Maldives. If the person wishes to pay by Telex Transfer, the bank details of MCAA is available upon request.

MCAA use only

Receipt/Invoice Number:

Date:

GUIDANCE NOTE

- A separate application is required for each air carrier agency for which approval is sought.
- A separate application is required for each agency location for which approval is sought.
- If additional space is required for any item, attach additional sheets of paper.
- Your application form will be returned to you if you do not supply all of the necessary information and/or the correct application processing fee.

Supporting documents check list

- Copy of certificate of Business registration,*
- Copy of Memorandum and articles of association of the company*
- Copy of the agreement between your company and air carrier*
- Copy of the letter of appointment*
- Copy of relevant training certificate(s)*
- Copy of IATA approval certificate (If IATA registered)*
- Copy of travel agency certificate of registration (If registered as a travel agency)*