



Section/division: Air Traffic Services  
 Telephone number: 011-545-1000  
 Physical address: Ikhaya Lokundiza, 16 Treur Close, Waterfall Park, Bekker Street, Midrand, Gauteng  
 Postal address: Private Bag X73, Halfway House 1685

Fax Number: 011-545-1282

Form Number: CA 172-02

Website: [www.caa.co.za](http://www.caa.co.za)

**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 applied for: (Indicate with an X)

AD	ACC	Issuing of an ATSU approval
APP	ACC Surveillance	Amendment to ATSU approval
APP Surveillance	FIS	Renewal of an ATSU approval
	AFIS	

**Note: Manual of Procedure to be attached for initial application**

Name of ATSU

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

<b>SIGNATURE OF APPLICANT</b>	<b>NAME IN BLOCK LETTERS</b>	<b>DATE</b>
<b>FOR OFFICIAL CAA USE ONLY:</b>	Receipt number:	
<b>SIGNATURE OF AUTHORISED OFFICER</b>	<b>NAME IN BLOCK LETTERS</b>	<b>DATE</b>