



Section/division:  
Telephone number:  
Physical address:  
Postal address:

**GENERAL AVIATION DEPARTMENT**

011-545-1000

Fax Number:

011-545-1350

Ikhaya Lokundiza, 16 Treur Close, Waterfall Park, Bekker Street, Midrand, Gauteng

Private Bag X73, Halfway House 1685

Form Number: CA 96-13

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

Fees: See CAR Part  
187.00.10

Over the counter payments

EFT, Internet, Wire, Electronic payments

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**GATE REQUIREMENTS PART 96****GATE I REQUIREMENTS**

- Application form completed and submitted by the Applicant.
- POPS completed and submitted by the Applicant.
- Proposed Schedule of Events submitted by the Applicant.
- Nominated Post holder's availability assured by the Applicant.
- TGM and Statement of Compliance supplied to Applicant.
- Have letters/agreements between owners and management entity/applicant if applicable.
- Revised Schedule of Events completed by PM.

**GATE II REQUIREMENTS**

- Formal Application Letter submitted by Applicant.
- Submitted all required documents (e.g. O.M, AMS, MCM, Statement of Compliance).
- Required Management (Post Holders) resumes submitted by the Applicant.
- Required management (Post Holders) approved by SACAA.
- Air Service License received.
- Facility selection for maintenance and training completed, if applicable.

**GATE III REQUIREMENTS**

- All manuals have been reviewed and approved or accepted.
- Training programs approved.
- Maintenance programs have been approved or accepted.
- Personnel trained by Applicant.
- All other discrepancies and open questions resolved satisfactorily.

**GATE IV REQUIREMENTS**

- Facilities evaluated and found satisfactory.
- Completed a successful initial audit.
- Demonstration phase satisfactorily completed.
- All corrective actions closed as per the audit.

<b>SIGNATURE OF INSPECTOR</b>	<b>NAME IN BLOCK LETTERS</b>	<b>DATE</b>