|  |  |
| --- | --- |
|  | FormCAA-FM-ATD04AJune, 2025 |
| ***APPLICATION FOR NEW AIR SERVICE LICENCE*** |
| *The form should be accompanied with the required documents listed in Appendix 3 and an application fee of* ***USD 1500*** *only* |
| **1** | **Name of Applicant** |  |
| **2** | **State of Applicant Registration/Incorporation** |  |
| **3** | **Physical Address** |  |
| **4** | **Correspondence Address** | **Postal Address** |  |
| **Town/City** |  |
| **Telephone** |  |
| **Email** |  |
| **5** | **Shareholder(s)** |
| **Name** | **Citizenship** | **Shares** |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
| **Authorized Share Capital** | **Total number of shares** | **Shares issued** | **Value of each share** |
|  |  |  |  |
| *If any shareholder is a company provide shareholding details in the above format* |
| **6** | **Type of air service (s) applied for (*refer to attached Appendix 2*)** |
|  |
| **a) SCHEDULED AIR SERVICE** |
| Tick type of air service |
| **i) [A1]** □□ Pax □ Cargo □ Mail |
| **Operation base(s)** |
|  |
| **Route**  (e.g. *Nairobi-Entebbe-Nairobi)* | **Flights per week** |
|  |  |
|  |  |
|  |  |
| **Aircraft** |
| Aircraft type | Aircraft registration | Owned/Dry Leased | Passenger capacity | Cargo capacity |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| **ii) [A2]** □□ Pax □ Cargo □ Mail |
| **Operation base(s)** |
|  |
| **Route** (e.g. *Wilson-Mombasa-Malindi-Mombasa-Wilson)* | Flights per week |
|  |  |
|  |  |
|  |  |
| **Aircraft:** |
| Aircraft type | Aircraft registration | Owned/Dry Leased | Passenger capacity | Cargo capacity |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| **b) INCLUSIVE TOUR CHARTERS / INTERNATIONAL NON SCHEDULED AIR SERVICE (FOREIGN OPERATORS)** |
| Tick type of non-scheduled air service |
| [B1]□□ Pax □ Cargo □ Mail | [B2]□  | [B3]□ | [B4]□ |
| **Operation base(s)** |
|  |
| **Routes** | **Flights per week** |
|  |  |
|  |  |
|  |  |
| **Aircraft** |
| Aircraft type | Aircraft registration | Owned/Dry Leased | Passenger capacity | Cargo capacity |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| **c) OTHER AIR SERVICES** (Non-Scheduled (Local Operators), Aerial Work, Flying Instructions) |
| **i) Tick type of air service and Geographical Area (GA)** |
| **Service** | **GA** | **Service** | **GA** | **Service** | **GA** | **Service** | **GA** |
| [B1]□□ Pax□ Cargo □ Mail | □G1□G2□G3□G4 | [B2]□ | □G1□G2□G3□G4 | [B3]□ | □G1□G2□G3□G4 | [B4]□ | □G1□G2□G3□G4 |
| [B5]□Pax □Cargo□ Mail | □G1 | [B6]□ | □G1 | [B7]□ | □G1 | [C1]□ | □G1□G2□G3□G4 |
| [C2]□ | □G1□G2□G3□G4 | [C3]□ | □G1□G2□G3□G4 | [C4]□ | □G1□G2□G3□G4 | [C5]□ | □G1□G2□G3□G4 |
| [C6]□ | □G1□G2□G3□G4 | [C7]□ | □G1□G2□G3□G4 | [C8]□ | □G1□G2□G3□G4 | [C9]□ | □G1□G2□G3□G4 |
| [D]□ | □G1 |  |  |  |  |  |  |
| **Operation base(s)** |
|  |
| **Aircraft** |
| Aircraft type | Aircraft registration | Owned/Dry Leased | Passenger capacity | Cargo capacity |
|  |  |  |  |  |
|  |  |  |  |  |
| **7.** | **Number of personnel employed and nationality**  |
|  | **Staff** | **Kenyans** | **Non Kenyans** |
| Flight Crew |  |  |
| Cabin Crew |  |  |
| Flight Engineers |  |  |
| Ground Engineers |  |  |
| Others |  |  |
|  |  |  |  |
| **8.** | Provide particulars of any working arrangement or financial interests you may have with any other company providing air services |
|  |  |
|  |
| I confirm that base(s)/aerodrome(s) and ground facilities are available and adequate for use by the aircraft proposed for the service. I, the undersigned, hereby apply for the grant of an Air Service Licence and I declare that, to the best of my knowledge, the statements given in this application are true and that the particulars entered on this application are accurate.I understand that the Licensing Authority may require additional information considered necessary for determining this application and may refuse to process this application if the information is not provided to its satisfaction. |
| Name of Authorised representative: |  | Position in company: |  |
| Signature  |  | Email: |  |
| Date: |  | Company stamp/seal: |  |

**Appendices**

|  |
| --- |
| **Appendix 1: Geographical Area (GA)** |
| G1 | Kenya |
| G2 | East African Community |
| G3 | Africa |
| G4 | Rest of the world |
|  |  |
| **Appendix 2: Type of service** |
| A1 | International scheduled air service  |
| A2 | Domestic scheduled air service  |
| B1 | International non-scheduled air service  |
| B2 | Inclusive Tour Charters |
| B3 | International non-scheduled emergency medical air service |
| B4 | International non-scheduled air service for self-fly hire |
| B5 | Domestic non-scheduled air service  |
| B6 | Domestic non-scheduled emergency medical air service |
| B7 | Domestic non-scheduled air service for self-fly hire |
| C1 | Aerial work service for advertising operations |
| C2 | Aerial work service for aerial patrol/observation/surveys |
| C3 | Aerial work service for aerial photography/sightseeing |
| C4 | Aerial work service for agricultural spraying/seeding/dusting |
| C5 | Aerial work service for cloud spraying |
| C6 | Aerial work service for fire spotting/control/fighting  |
| C7 | Aerial work service for game and livestock selection/culling/counting/herding |
| C8 | Aerial work service for parachute jumping/tag operations |
| C9 | Aerial work service for acrobatic operations |
| D | Flying instructions |

|  |
| --- |
| **Appendix 3:** 1. **Documents to be attached by local applicants**
 |
| 1 | Certified true copy of most recent company registration form 12 (CR12) or Business Registration Service form for applicant and any shareholding company |
| 2 | Certified true copy of certificate of incorporation; |
| 3 | Certified true copy or copies of the applicant’s certificate(s) of registration for all listed aircraft |
| 4 | For leased aircraft, duly executed dry lease agreement or lease approval |
| 5 | Certified true copy of the insurance policy or insurance arrangements in place where applicable; |
| 6 | A business plan for a period of two years in the format prescribed in the 5th Schedule of the Licensing of Air Service regulations |
| 7 | Certified true copy of national identity card or passport and two passport size photographs in respect of each of the directors of the company; |
| 8 | Documentary evidence of existing and projected sources of funds |
| 9 | Any other document in support of the application for the air service |

|  |
| --- |
| 1. **Documents to be attached by foreign applicants**
 |
| 1 | A copy of Air Operator Certificate (AOC) and Operations Specifications (OpSpecs) issued by the State of the applicant; |
| 2 | Certified true copy of audited financial accounts for twelve months preceding the application; |
| 3 | Certified true copy of the insurance policy in place; |
| 4 | A copy or copies of certificate(s) of registration of aircraft; |
| 5 | A copy of the charter agreement for Inclusive Tour Charter applicants;  |
| 6 | Any other document in support of the application for the air service. |