

(Name and logo of Applicant)  
(Appropriate Address)

[Ref]

[Date]

**The Director General**  
Kenya Civil Aviation Authority  
P.O Box 30163 00100  
**Nairobi.**

**Attn: Director, Aviation Safety & Security Regulation**

**RE: APPLICATION FOR CERTIFICATION / RE-CERTIFICATION AS AN AVIATION SECURITY SERVICE PROVIDER**

This is a formal application for a Kenya Civil Aviation Authority (KCAA) Aviation Security Service Provider Certificate.

*(Name of Applicant)*, intends to provide aviation security services under the Kenya Civil Aviation (Security) Regulations (KCASRs) and the National Civil Aviation Security Programme (NCASP).

Our key management personnel are as follows:

- |                                |                                   |
|--------------------------------|-----------------------------------|
| 1. CEO and Accountable Manager | – Prof. Robert Matano Kuria       |
| 2. Director of Operations      | – Mr. Hamilton Cherop Kipng’etich |
| 3. Manager Operations          | – Mrs. Sarah Kinda Patricks       |
| 4. Quality Manager             | – Ms Crazy Tracy Grace            |
| 5. Manager, Training           | – Mr. Joel Day                    |
| 6. Manager, Security           | – Mr. Dugdale O’toyoh Kenneth     |

Our contact person for the process is ..... of cell phone: .....  
and email: .....

Enclosed are the duly completed and signed ASSP Validation Form and Document Evaluation Checklist and Declaration of Commitments as required.

**Prof. Robert Matano Kuria**  
**Chief Executive Officer**

\*Enclosures