K.C.A.A. Form 0003/1



APPLICATION FOR A LICENCE FOR INCLUSIVE TOUR CHARTERS

Notes:

- 1. When completed this Form should be submitted in **Duplicate** to The Director General, Kenya Civil Aviation Authority (KCAA)- Air Transport Department, with the requisite documents listed at the end of this form
- 2. The Form should be accompanied by an application fee of US \$500 for renewal and US\$1500 for new applications
- 3. All parts/sections of the application must be filled as indicated if and when Applicable
- 4. This application must be signed by:
 - *i) the owner, in the case of a sole proprietor,;*
 - *ii)* a director or an authorized officer, in the case of a body corporate,
 - *iii)* a partner or an authorized officer, in the case of a partnership,
- 5. Where the required information cannot be furnished in the space provided on this form, the information must be submitted as annexures.
- 6. Copies of documents to be attached to the application should be certified by a Commissioner for *Oaths*.
- 7. Application should bear the Company's Seal and/or Stamp

PART A: PARTICULARS REGARDING THE APPLICANT

Name of Applicant/Business Name.....
Business Postal Address.....

3.	. If the Applicant is a Company, the following particulars should be given:-				
	(a)	Registered Office/Physical Address			
	(b)	Company Registration No/Certificate of Incorporation			
	(c)	Date of incorporation			
	(d)	Trade Name (if applicable)			
	(e)	Postal Address of Correspondence			
	(f)	Tel			
	(g)	Fax.			
	(h)	Email			
4.	Nationality	of Applicant			

5. State the type and model, registration marks and maximum take-off of weight of each aircraft to be used in this operation.

Type Model and Series	Aircraft Registration Mark	Name of Owner	Capacity Pax	Capacity cargo	Max Take off weight

6. Give the full itinerary for the flight showing all places to be served and the ultimate destination of the flight.

.....

 Provide details of the number of passengers to embark and disembark at each point on the route and the respective dates in the table below:

Point of Embarkation/ Aerodrome	Date of departure	Number of passengers embarking	Point of Disembarkation/ Aerodrome	Date of Arrival	Number of disembarking passengers

8.		Give the full name and address of aircraft operator's local representative or agent.
9.		Provide the following information for the inclusive tour charter:-
a)		Type of Tour (e.g. hunting, photography, leisure, sight-seeing, game viewing etc)
	b)	Name of the hotel(s) where passengers are booked.
	c)	Duration of tour
	d)	Any other relevant information
10.		Give the full name and business address of the charterer and the full name and address of the local representative or agent
	· · · · ·	

PART B: LIABILITY FOR LOSS OR DAMAGE

11. Provide the following details;

- iii) Third party liabilities <u>USD</u>
- c) In the case of a combined single limit liability, please state the risks covered including the amount

Note: Insurance cover to be provided must be as prescribed in the Civil Aviation (Licensing of air Services Regulations 2018)

PART C: DECLARATION REQUIRED IN RESPECT OF INCLUSIVE TOUR CHARTERS

I. Declaration by the Tour Operator

I/We the undersigned certify on behalf of by me/us that:

a) The information given in Part I above is correct

b) The aircraft for the flight(s) has/have been chartered by me/us

Signed:
Name (in Block letters):
Position:
Address:
On behalf of:
Date:

II. Declaration by the Airline

I/We the undersigned certify that:-

a) The information given in I above is correct

- b) The aircraft for the flight(s) has been chartered by
- c) The total carrying capacity of the aircraft shall be at the disposal of the tour operator

d) The laws and regulations in force governing the flight(s) will be complied with

Signed:

(Company

Seal)

Name (in Block Letters)
Position
On behalf of
(Name and address of airline)
Date:

III. Declaration by the Tour Operator's Local Agent (if any)

I/We the undersigned certify on behalf of					
a)	The information given in I and II above is correct.				
<i>b)</i>	Adequate arrangements concerning ground services have been made (Certified copies of documents confirming these arrangements to be attached)				
Signed	1:				
	Company Seal				
Name (in Block Letters):					
Position:					
On behalf of:					
Date:					

DECLARATION

I, the undersigned, hereby declare that. to the best of my knowledge and belief, the information given in this application and in the attachments hereto is true in every respect.

I enclose herewith crossed Cheque/Banker's Draft/ Cash of US\$being payment of the application fee.				
Dated this	Day of	Year		
Signature				
Signatory's Name in Block letters				
Position				
On behalf of				

Attach the following documents as appropriate:

- 1. Operations statistics for the preceding one year
- 2. Audited financial accounts for one year preceding the application submission
- 3. Aircraft Insurance Certificate and Policy
- 4. Air Operators Certificate
- 5. Certificate of Incorporation or company registration (new local applicant)
- 6. Business Plan (new local applicant)
- 7. Charters Agreement
- 8. Declaration from the aircraft operator
- 9. Declaration from the tour operator or his duly authorized representative or agent
- 10. Any other additional document to support the application