



Section/division
Telephone number:
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Category Z Aerodromes & Heliports
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Form Number: CA 139-03
Fax Number: 011-545-1451

Website: www.caa.co.za

APPLICATION FOR APPROVAL OF HELISTOP

Notes:

1. An application for the issuing of a helistop approval, or an amendment thereof, must comply with the provisions of CAR 139.04.5.
2. An application for the renewal of a helistop approval must comply with the provisions of CAR 139.04.1 and CAR 139.04.9.
3. Section E (4) is not applicable to an application for renewal of a helistop approval.
4. The original application must be submitted to the Director of Civil Aviation.
5. Where the required information cannot be furnished in the space provided, the information must be submitted as a separate memorandum and attached hereto.

MARK THE APPROPRIATE BLOCK:

Application for a helistop approval or amendment

Application for the renewal of a helistop approval

A. PARTICULARS OF APPLICANT

| | | | | |
|----|---|--|-------------|--|
| 1. | Proposed name for helistop | | | |
| 2. | Applicant's name | | | |
| 3. | Postal address / residential address | | | |
| | | | Postal code | |
| 4. | Telephone number | | | |
| 5. | Telefax number | | | |
| 6. | Cellular phone number | | | |
| 7. | E-mail address | | | |
| 8. | Company VAT number | | | |

B. PARTICULARS OF HELISTOP

| | | | | | |
|----|---|----------------|------------------------------|----------------|---|
| 1. | For what purpose is the helistop intended, mark appropriate block/s | Private use | | Commercial use | |
| | Emergency use | | VFR daylight operations only | | |
| | VFR day and night operations | | | | |
| 2. | For what period is the helistop intended | | Years | | |
| 3. | Type of helicopters for which the helistop is planned | | | | |
| 4. | Geographical Position: | South Latitude | ° | ' | " |
| | | East Longitude | ° | ' | " |
| 5. | Description of position | | | | |
| | | | | | |
| 6. | Elevation | | Feet | | |
| 7. | Is the helistop situated at ground level | YES | | NO | |

| | | | | | | | | |
|--------------------------------------|---|--------------------|------------|----------|-------------------|-------------------|-------------------|----|
| 8. | If the answer to 7 is "NO" , please explain | | | | | | | |
| 9. | Maximum mass of helicopter that the helistop can accommodate | | | | | | kilogram | |
| 10. | If the helistop is not situated at ground level, has a qualified engineer confirmed the figures quoted in 9 | | | | | | YES | NO |
| 11. | Is this your first application in respect of this helistop | | | | | | YES | NO |
| 12. | If not, kindly state date of previous application | | | | | | | |
| 13. | Landing and take-off directions °M | | | 1 | | | | 2 |
| 14. | Touchdown and lift-off area (square) | | m | X | m | Nature of surface | | |
| 15. | Touchdown and lift-off area (circle) | | m diameter | | Nature of surface | | | |
| 16. | Final Approach and Take-off Area (rectangular) | | | | | | | |
| | Length | | m | Width | | m | Nature of surface | |
| 17. | Final Approach and Take-off Area (circle) | | | | | | | |
| | | | m | diameter | | Nature of surface | | |
| 18. | Peripheral area | | | Width | | m | | |
| 19. | Slopes of touchdown area | | | | | | | |
| | 19.1 | Longitudinal slope | One In | | 19.2 | Lateral slope | One In | |
| 20. | Safe approach slope | | | | | | One In | |
| 21. | Slopes of transitional surface | | | | | | One In | |
| 22. | Do safe routes to and from the helistop exist | | | | | | YES | NO |
| C. PARTICULARS OF EQUIPMENT | | | | | | | | |
| 1. | Fire fighting equipment | | | | | | | |
| 2. | First-aid-equipment | | | | | | | |
| D. OTHER SERVICES AVAILABLE | | | | | | | | |
| 1. | Telephone Numbers | | | | | | | |
| 2. | Particulars of other services available | | | | | | | |
| E. OTHER INFORMATION REQUIRED | | | | | | | | |
| 1. | Are you the owner of the terrain or elevated structure on which the helistop is planned | | | | | | YES | NO |
| 2. | If not, what rights do you hold on to it. | | | | | | | |
| 3. | REMARKS | | | | | | | |

| | | | | | |
|--|--|-----------------------------------|--|-------------|--|
| | | | | | |
| 4. | SUPPORTING DOCUMENTS: | MARK THE APPROPRIATE BLOCK | | | |
| | Approval of local government | YES | | NO | |
| | Approval of interested government institutions | YES | | NO | |
| I hereby declare that the above particulars are true in every respect and undertake insofar as possible to keep the helistop in a serviceable condition. | | | | | |
| | | | | | |
| SIGNATURE OF APPLICANT | | NAME IN BLOCK LETTERS | | DATE | |
| CAPACITY OF SIGNATORY | | | | | |

| | | | |
|----------------------------|---|-------------------------------------|--|
| A. FOR OFFICIAL USE | | | |
| 1. | Feasibility of proposed location | | |
| | Remarks | | |
| 2. | Emergency landing areas within approach and take-off areas | | |
| | Remarks | | |
| 3. | Safe routes | | |
| | Remarks | | |
| 4. | Are there obstructions in the vicinity of the helistop | | |
| | Remarks | | |
| 5. | Letter of consent obtained from Local Municipality | | |
| | Remarks | | |
| 6. | Letter of consent obtained from Air Traffic and Navigation Services | | |
| | Remarks | | |
| 7. | PHYSICAL PROPERTIES | | |
| | a. | Touchdown and lift off area | |
| | | | |
| | b. | Final approach and take-off area | |
| | | | |
| | c. | Peripheral area | |
| | | | |
| | d. | Obstacles below Approach slopes | |
| | | Remarks | |
| | e. | Obstacles below Transitional slopes | |
| Remarks | | | |

| A. FOR OFFICIAL USE | | |
|--|--|-------------|
| f. | Helicopter warning sign provided | |
| | Remarks | |
| a. | Windsock compliant | |
| | Remarks | |
| b. | Markings compliant | |
| | Remarks | |
| c. | Fire extinguishers available and serviceable | |
| | Remarks | |
| d. | Lighting aids for night operations compliant | |
| | Remarks | |
| RECOMMENDATION | | |
| | | |
| | | |
| SIGNATURE OF INSPECTOR: CZH | NAME IN BLOCK LETTERS | DATE |
| RECOMMENDED / NOT RECOMMENDED | | |
| | | |
| SIGNATURE OF M: CZH | NAME IN BLOCK LETTERS | DATE |
| RECOMMENDED / NOT RECOMMENDED | | |
| | | |
| SIGNATURE OF SM: ADFA | NAME IN BLOCK LETTERS | DATE |
| APPROVED / NOT APPROVED | | |
| | | |
| SIGNATURE OF E: AI | NAME IN BLOCK LETTERS | DATE |