



Section/division: COMMUNICATION, NAVIGATION AND SURVEILLANCE  
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Form Number: CA 171-14

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	Over the counter payments EFT, Internet, Wire, Electronic payments
ESO APPROVAL / Fees: See CAR Part 187.XX.XX	

## APPLICATION FOR RADIO SITE APPROVAL

**Note:** Safety assurance documentation (Safety Case) shall be submitted with the application for any new service. Private radiotelephony base station applications shall be accompanied by a proof of competency in the use of aeronautical voice radio equipment.

### PART 1: PARTICULARS OF THE APPLICANT

#### Name and address of person or organisation applying for approval

Full name:			
Trade name:			
Legal status of applicant/holder (individual/close corporation/company/trust/other – specify):			
Registration number:			
Business address:			
		Postal code:	
Postal address:			
		Postal code:	
Tel No		Fax No	e-mail:

#### Full particulars in respect of the individual/each responsible director/shareholder/partner/member/office bearer:

Name	Position	Identity number	Nationality	Country of permanent residence

#### Name and address of person to whom enquiries should be addressed if different to the above:

Name:			
Postal address:			
		Postal code:	
Tel No		Fax No	e-mail:

### PART 2: INFORMATION FOR THE PROPOSED RADIO SITE

#### Proposed Radio site details:

Name of aerodrome or site:			
Site Location	Lat.		Long.
Type of service desired:			
Permanent or temporary installation: (Indicate with an X)			
Permanent		Temporary	
Equipment details			
Manufacturer:			
Model:			
Antenna height above ground (meters)			

The applicant/holder declares hereby that the particulars provided in this application are true in every respect:		
<b>SIGNATURE OF APPLICANT</b>	<b>NAME IN BLOCK LETTERS</b>	<b>DATE</b>

<b>PART 3: FOR CAA OFFICIAL USE ONLY</b>		
<b>Receipt number:</b>		
<b>SIGNATURE OF AUTHORISED OFFICER</b>	<b>NAME IN BLOCK LETTERS</b>	<b>DATE</b>
<b>APPROVED BY MANAGER: CNS</b>	<b>NAME IN BLOCK LETTERS</b>	<b>DATE</b>