

## Application for Inspection Authorisation (IA) Initial or Renewal Course

### 1. Personal Details

NZ CAA Client / Licence Number <i>(if known)</i>					Date of Birth <i>(dd/mm/yy)</i>				
Title <i>(Mr/Mrs/Ms/Miss)</i>			Last Name						
Given Name(s)									
Country of Birth					Nationality				
Address for Service - <i>Civil Aviation Act, s8, requires applicants to provide an address for service in New Zealand (i.e. a physical address) and to promptly notify the Director of any changes.</i>									
Tel			Mob						
Fax			Email						
Postal Address <i>(if different from Address for Service)</i>									
Tel			Mob						
Fax			Email						

### 2. Course Details (incl GST)

<i>Please complete which course and course options.</i>	Renewal Course - \$330.00 <input type="checkbox"/>	Initial Course NZ AMEL holder \$500.00 <input type="checkbox"/>	Initial Course Foreign AMEL holder \$1700.00 <input type="checkbox"/>
	Venue Option		
	Date		
<b>Notes:</b>			
1. If applying for an Initial Course please apply to <a href="#">ASL</a> for IA Examination - AMEL Subject 25			
2. Separate application to be completed for issue of <b>IA Certificate</b> , once meet eligibility requirements - on Form <a href="#">24066/10</a>			

### 3. Payment Details

<b>DO NOT SEND CASH.</b> <i>Please fill in credit card details.</i>	Visa <input type="checkbox"/>	Mastercard <input type="checkbox"/>	Expiry Date (mm/yy)	/
	Name on Card			
	Card Number			

Post this form to:  
Civil Aviation Authority, PO Box 3555, Wellington, New Zealand

#### CAA USE ONLY

Receipt No.	Receipt Date	Invoice Code
		INSPECT
1. Course acceptance letter		Yes <input type="checkbox"/> N/A
2. Application for examination with ASL		<input type="checkbox"/> <input type="checkbox"/>
3. Course Certificate		<input type="checkbox"/>