



APPLICATION FORM FOR APPROVAL AS AN IATA PASSENGER SALES AGENT

The information requested below is required by IATA to assist in determining the eligibility of the applicant for inclusion on the IATA Agency List. Type or print clearly the answers to all questions on this form. Where additional space is required, or where you wish to supplement your answer and there is insufficient space, attach to this form additional sheets containing the data. Retain a copy of this application for your permanent records at the agency location.

NOTE: A separate form is required for each agency location for which approval is sought.

SECTION 1 - IDENTIFICATION OF AGENCY LOCATION FOR WHICH APPROVAL REQUESTED

1.1 Legal name:

1.2 Trade name, if different from 1.1 above:

1.3 Full address of the office for which application for approval is made:

..... Telephone No:

..... Telefax No:

..... E-Mail:

..... Website:

1.4 If registration and/or license is required by law in your country, give:

1. the trade registration or license number of the agency:

2. the date this was granted:

3. please attach a copy of the official certificate of registration and/or license

1.5 Date on which the office for which approval is sought opened as a travel agency.

SECTION 2 - GENERAL INFORMATION

2.1 Is approval sought as:

2.1.1. A head office location YES NO

2.1.2. A branch office location of an IATA Approved Agent YES NO

If Yes:

2.1.2.1 Give name, address, telephone number, e-mail address and IATA Numeric Code of IATA Approved Head Office

..... Telephone No:

..... Telefax No:

..... E-Mail:

..... Website:

IATA Numeric Code: -



2.1.2.2 Is the branch office

(I) wholly owned by this Head Office? YES NO

(ii) Wholly managed by this Head Office? YES NO

2.1.2.3 Is this application for an On-line Agency (issuing only Electronic Tickets)?

YES NO

2.2 Specify legal status:

Sole proprietorship partnership limited liability company

Other (describe).....

2.3 If your travel agency is owned by an organization other than the head office mentioned above, answer the following with respect to the parent organization:

1. What is its legally registered name and address?

.....

2. What is the principal business of this organization?

.....

SECTION 3 – FINANCIAL INFORMATION OF BUSINESS ENTITY

Specify as applicable:

3.1 Registered capital:

3.2 Paid-up capital:

3.3 Minimum paid-up capital required by the law of your country:

3.4 VAT No.

3.5 Attach a copy of your current financial statements including balance sheet and profit and loss account certified by a chartered, certified public or certified general accountant.

SECTION 4 - BUSINESS ENTITY OF AGENCY

4.1 If SOLE OWNER:

Name	Address, Telephone, Fax and Email	% of time devoted to the agency business

4.2 If PARTNERSHIP:

Names and Titles of Partners	Address, Telephone, Fax and Email	% of time devoted to the agency business	Financial Interest %



4.3 If CORPORATION:

1. When and where incorporated:

2. Names of shareholders*	Address, Telephone, Fax and Email	% of time devoted to the agency business	Financial Interest % (i.e. share-holding)

* except where your organization is a legal entity whose shares are listed on a security exchange or are regularly traded in an 'over-the-counter' market.

3. Name and Titles of Directors and Officers

.....
.....
.....

4.4 IF NONE OF ABOVE APPLIES, fully describe the type of business entity, when and where organized and the names and titles of persons holding a financial or managerial interest in the business, the nature and extent of their interest, their address, telephone number, fax number, email address and percentages of their time devoted to the agency business:

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.....

SECTION 5 - DETAILS OF OWNERS, MANAGERS AND STAFF OF AGENCY

5.1 Attach a list setting forth the names and experience in the travel industry of managerial personnel and other full-time travel staff members qualified and competent to sell international air transportation and issue travel documents, giving details as follows:

- 1. Name of manager or staff:
- 2. Position or title:
- 3. Date joined agency location for which approval is sought:
- 4. Name of previous employer(s) and address(es). If previous employer(s) were travel agents, indicate if IATA approved or not:
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.....
.....
- 5. Date(s) of previous employment (month/year):
- 6 Position held during previous employment:

NOTE: List relevant qualifications (Diploma/Certificate certifying the successful completion of an airline or IATA/UFTAA training course or equivalent).



5.2 If any of the questions below are answered in the affirmative, give the name(s) of the agency or agencies and location(s) involved, the relationship of the individual(s) with the agency or agencies, the date of the bankruptcy or default and all pertinent details:

1. If a sole proprietor, have you:

- | | | | |
|-----|---|------------------------------|-----------------------------|
| (a) | been involved in bankruptcy proceedings? | YES <input type="checkbox"/> | NO <input type="checkbox"/> |
| | if so, are you now legally and fully discharged of their obligations by the court involved? | YES <input type="checkbox"/> | NO <input type="checkbox"/> |
| (b) | at any time been a director or had a financial interest or a position of management in an IATA Agent which has been removed from the IATA Agency List or which was under notice of default and still has outstanding debts to IATA Members or in an IATA Agent whose debts to IATA Members were met by recourse to a financial bond or guarantee? | YES <input type="checkbox"/> | NO <input type="checkbox"/> |
| (c) | been found guilty of willful violations of fiduciary obligations in the course of business? | YES <input type="checkbox"/> | NO <input type="checkbox"/> |

2. If an unincorporated firm, partnership or association, have any partners or any individual having authorization to act and sign on behalf of such firm, partnership, or association:

- | | | | |
|-----|---|------------------------------|-----------------------------|
| (a) | been involved in bankruptcy proceedings? | YES <input type="checkbox"/> | NO <input type="checkbox"/> |
| | If so, are they now legally and fully discharged of their obligations by the court involved? | YES <input type="checkbox"/> | NO <input type="checkbox"/> |
| (b) | been a director or had a financial interest or a position of management in an IATA Agent which has been removed from the IATA Agency List or which was under notice of default and still has outstanding debts to IATA Members or in an IATA Agent whose debts to IATA Members were met by recourse to a financial bond or guarantee? | YES <input type="checkbox"/> | NO <input type="checkbox"/> |
| (c) | been found guilty of willful violations of fiduciary obligations in the course of business? | YES <input type="checkbox"/> | NO <input type="checkbox"/> |

3. If a corporation, have any officers, directors or managers:

- | | | | |
|-----|---|------------------------------|-----------------------------|
| (a) | been involved in bankruptcy proceedings? | YES <input type="checkbox"/> | NO <input type="checkbox"/> |
| | If so, are they now legally and fully discharged of their obligations by the court involved? | YES <input type="checkbox"/> | NO <input type="checkbox"/> |
| (b) | been a director or had a financial interest or a position of management in an IATA Agent which has been removed from the IATA Agency List or which was under notice of default and still has outstanding debts to IATA Members or in an IATA Agent whose debts to IATA Members were met by recourse to a financial bond or guarantee? | YES <input type="checkbox"/> | NO <input type="checkbox"/> |
| (c) | been found guilty of willful violations of fiduciary obligations in the course of business? | YES <input type="checkbox"/> | NO <input type="checkbox"/> |



SECTION 6 – PREMISES OF AGENCY LOCATION FOR WHICH APPROVAL REQUESTED

- 6.1 What are the normal business hours and days of the week that the office is open:
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.....
.....
- 6.2 Are the premises located at an airport? YES NO
- 6.3 Describe the means by which the premises are identified as a travel agency:
- 6.4 Attach a photograph of the exterior and of the interior of the location.
- 6.5 If an On-line Agency specify URL address

SECTION 7 - SECURITY OF TRAFFIC DOCUMENTS AND AIRLINE IDENTIFICATION PLATES

Applicants will be required to provide evidence at the time of inspection that they meet the requisites for Traffic Document security, as advised by the Agency Services Office.

- 7.1 Describe the type of facility you have in the agency for the storage of your on-premises working supply of Traffic Documents or other accountable documents:
.....
.....
.....

SECTION 8 - OTHER INFORMATION

- 8.1 Is the agency a General Sales Agent for any IATA or non-IATA airline? YES NO
If yes, specify:
 - 1. Name of airline(s):
 - 2. Scope of operation:
 - 3. GSA territory:
- 8.2 Provide the names of individuals authorized to sign, on behalf of the applicant, documents which relate to the day-to-day operation of the travel agency:
.....
.....
.....
- 8.3 Submit in accordance with the attached format, a statement of your current international air passenger transportation sales.



8.4 If approved as an IATA Agent, what do you estimate will be the gross amount of international air transportation sales of IATA carriers at the location for which approval is requested:

(a) In your first year?

(b) In your second year?

8.5 Is your agency an IATA Registered **Cargo Agent**? YES NO

If so, name under which it is registered:

.....
.....
.....

IATA Numeric Code: -

8.6 Attach a sample of your agency's letterhead.

I hereby certify that the foregoing statements (including statements made in any attachment hereto) are true and correct to the best of my knowledge and belief, and that I am authorized by the organization identified in the answer to A. of Part I above to make these statements and file this document.

It is hereby agreed that this application shall become a part of every Sales Agency Agreement signed with Members of IATA for the sale of international air passenger transportation, and as such, all information contained herein will be treated as confidential (excluding the information contained in Section 1). Notwithstanding the foregoing, the applicant authorizes IATA to use and process the information contained in Sections 2.1.2.2, 2.2, 4, 5.1.1 and 5.1.2, in order to produce and distribute databases among the airline industry participants.

The applicant hereby expressly waives any and all claims, causes of action or rights to recovery and agrees to indemnify and hold harmless IATA or any of its Members, their officers, employees, agents or servants, for any loss, injury or damage based upon libel, slander or defamation of character by reason of any action taken in good faith pursuant to this application, including but not limited to a notice of disapproval.

The applicant understands and agrees that if the application for accreditation as an IATA Agent is disapproved, he will not claim any commission, remuneration or compensation for the sale of air transportation over the services of any IATA Member during the period the application was under consideration.

The applicant understands and agrees to pay the application entry and annual fees, in the amounts determined by the Conference in consultation with the Director General and as advised by the Agency Administrator, for inclusion and retention on the Agency List. If the application is rejected, the entry and initial annual agency fees shall be returned to the applicant.

Signature of Applicant

Country

Print/Type Name of Applicant

Date

Title/Position

Note. The application should be submitted to the IATA Agency Services Office and must be complete in all respects before processing can begin.

