



# Dept. of Transportation, Communication & Infrastructure: Civil Aviation Division

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## APPLICATION FOR AIR OPERATOR CERTIFICATE

Date: \_\_\_\_\_

Company Name: \_\_\_\_\_

C.E.O.: \_\_\_\_\_

Company Full Address: \_\_\_\_\_

Company State of Registry: \_\_\_\_\_

Submit Copy of Foreign Investment Permit  Enclosed

Submit Copy of Insurance Policy  Enclosed

Submit Copy of Company Operations Manual  Enclosed

Submit Copy of Company Security Program  Enclosed

Submit Copy of Maintenance Control Manual  Enclosed

Submit Copy of Aircraft Registration & State of Registry  Enclosed

Submit Copy of Certificate of Airworthiness (C of A) for each Aircraft to be used.  Enclosed

Aircraft Type:

Number of Aircraft:

Aircraft Type:

Number of Aircraft:

Aircraft Type:

Number of Aircraft:

Aircraft will be used for:  Domestic  International  Both

Type of Service:  Passenger  Cargo  Both

Number of Flights per week into the Federated States of Micronesia: \_\_\_\_\_

**BY YOUR SIGNATURE ON THIS APPLICAITON THE COMPANY AGREES  
TO ABIDE BY ALL LAWS, REULES AND REGULATIONS OF THE  
FEDERATED STATES OF MICRONESIA  
CIVIL AVAITION REGULATION AND AERONAUTICS CODE TITEL 20**

**Signed** \_\_\_\_\_

**This** \_\_\_\_\_ **day of** \_\_\_\_\_, **20** \_\_\_\_\_

**Title** \_\_\_\_\_