

Authority to Use Airside (AUA) Application



1. APPLICANT'S DETAILS		*ALL FIELDS ARE MANDATORY*	
Company:	ASIC No:	Expiry:	
First Name:	Surname:		
Address:	Title/Position:		
.....	Phone:		
Email:	Date of Birth: / /		
2. ACCESS INFORMATION			
Area:	Reason:	Times per Annum:	
.....	
.....	
3. VEHICLE DETAILS		<input type="checkbox"/> New	<input type="checkbox"/> Existing
Make:	Fuel Type:	<input type="checkbox"/> Unleaded	<input type="checkbox"/> LPG
		<input type="checkbox"/> Natural Gas	
Model:		<input type="checkbox"/> Electric	<input type="checkbox"/> Diesel
		<input type="checkbox"/> Other (<i>specify below</i>)	
Year:		
Registration:	Serial No. (If not registered):		
Registration Expiry: / /	Communication Equipment:		
4. COMPREHENSIVE OR THIRD PARTY PROPERTY INSURANCE			
Insurer:	*Copy of Insurance Certificate must be attached*		
Policy Expiry: / /	Amount of Cover (\$20M minimum): \$.....		
5. ARRANGEMENTS FOR MOVING VEHICLE IF IMMOBILISED			
.....			
6. ACKNOWLEDGEMENT BY THE APPLICANT			
<ul style="list-style-type: none"> The Applicant has read the Airside Vehicle Control Handbook and agrees to fulfil the requirements of Vehicle Operator as set out in the Airside Vehicle Control Handbook. The Applicant will ensure that the vehicle is operated in accordance with the Airside Vehicle Control Handbook (particularly PART 1, the CAR's and CAO's pertaining to vehicles operating Airside). The Applicant acknowledges that the PAL Airside Operations Manager may cancel or suspend this Permit at any time. In consideration of being granted an Authority to Use Airside (AUA) in accordance with this application, the Applicant agrees to release and indemnify Parafield Airport Limited (PAL) in relation to all claims for damage to the vehicle in moving the vehicle if the vehicle becomes immobilised on the Movement Area in accordance with the signed Indemnity & Release Form. 			
Applicants Signature:	Date:/..... /		
Company Authorised Name:	Title/Position:		
Company Authorised Signature:	Date:/..... /		
OFFICE USE ONLY			
AUA Permit No:	Issue Date:/..... /	Expiry Date: / /	Indemnity Release held: <input type="checkbox"/> Yes <input type="checkbox"/> No