



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.

Should you require more information regarding the below fields, please consult the appendix attached. (Page 8) (This form shall be completed electronically and printed for signing)

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:

Street name and numbe	r	
Postal code	City	Country
Tel:	Fax:	
Email:		
WebSite:		
If registration and/or	r license is required by law in your c	country give:
-		
-	tration or license number of the age	ncy:
1.4.2 the date this w	/as granted:	
1.4.3 please attach	a copy of the official certificate of re	gistration and/or license.
Date on which the o	ffice for which approval is sought o	pened as a travel agency.
CTION 2 - GENERA	AL INFORMATION	
Is approval sought a	as:	
2.1.1 A head office lo	ocation	YES NO
	e location of an IATA Approved Age	ent YES NO
If Yes:		
2.1.2.1 Give name, a	address, telephone number, e-mail a	address and IATA Numeric Code of IATA Approved Head Office:
Street name and nu	umber	
Postal code	City	Country
Tel:	Fax:	
Email:		
WebSite:		
Head	Office IATA Numeric Code:	

	the branch office				1	
Wholl	y owned by this He	ad Office:	YES	NO	J	
Wholl	y managed by this	Head Office:	YES	NO]	
	this application fo ssuing only Electro	r an On-line Agency. onic Tickets)?	YES	NO]	
2.2 Specify	legal status:					
Sole p	proprietorship	Partnership Limited	d Liability Comp	oany]	
Other	(Describe)					
	ravel agency is ow he parent organiza		er than the hea	d office ı	mentioned above, answer the	following with
2.3.1 \	What is its legally r	egistered name and addres	ss?			
2.3.2	What is the princip	al business of this organiza	ation?			
SECTION	3 – FINANCIAL II	FORMATION OF BUSIN	IESS ENTITY			
Specify as	Applicable:					
3.1 Register	red capital:					
3.2 Paid-up	capital:					
3.3 Minimu	n paid-up capital r	equired by the law of your	country:			
3.4 VAT Nu	mber:					

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:			
EMAIL:					
% OF TIME DEVOTED TO THE AGENCY BUSINESS:					

4.2: If PARTNERSHIP:

Names and Titles of Partners	ADDRESS, Telephone, Fax and Email	time devoted e agency business	Financial Interest.	
		%	%	
		%	%	
		%	%	
		%	%	
		%	%	



4.3: If CORPORATION:

4.3.1. When and where incorporated:

4.3.2. Names of Shareholders *	ADDRESS, Telephone, Fax and Email	 time dev e agency	oted business	Financi Interes	
			%		%
			%		%
			%		%
			%		%
			%		%

*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.

4.3.3. Name/s and Title/s of Director/s and Officer/s:

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:

SECTION 5 - DETAILS OF OWNERS AND MANAGERS OF AGENCY

5.1 Attach a list setting forth the names of owners and managerial personnel giving details as follows:

5.1.1 Name :		
5.1.2 Position or title:		
5.1.3 Date joined agency	location for which approval is sought:	
5.1.4 Name of previous e IATA accredited or not:	mployer(s) and address(es). If previous employer(s) were travel agents, indicate if	
5.1.5 Date(s) of previous	employment (month/year):	
5.1.6 Position held duri	g previous employment:	



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:

5.2.1. Have you, or any partner, officer, director, manager or any individual having authorization to act and sign on behalf of any such firm, partnership, association or corporation: :

5.2.1.1 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 is under notice of default and still has outstanding commercial debts?

YES NO

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SECTION 6 - PREMISES OF AGENCY LOCATION FOR WHICH APPROVAL REQUESTED

6.1 Are the premises located at an airport?	YES		N
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6.2 Describe the means by which the premises are identified as a travel agency:

6.3 Attach a photograph of the exterior and of the interior of the location.

6.5 If an Online Agency specify URL address:

SECTION 7 - SECURITY OF TRAFFIC DOCUMENTS

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 Administrator or the Secretary of the Agency Investigation Panel.

SECTION 8 - OTHER INFORMATION

8.1 Is the agency a General Sale	YES	NO		
If yes, specify:				
8.1.1 Name of airline(s):				
8.1.2 Scope of operation:				
8.1.3 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:

8.4.1 In your first year?

8.4.2 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		Name of Applicant					
Title		Country					
Date							





Please provide details of international air passenger transportation generated at:

Legal Name:				
Full Address:				
	Street name and number			
	Postal code	City		Country
Period covered:	From:		То:	

Name of ticket iss	suing Airline	Amount of cash sales for IA	TA member Airlines
	Total in local currency: Total in US Dollars:		
Rate of exchange us			
USD	1 =		
		P.4	
Signature		Date	





Guidelines to correctly fill in the application form

- **1.1** Registered company name. Indicate also the company legal status: LTD, SA, etc.
- 1.2 In case of an On-Line travel agency please indicate the web address.
- **1.3** Include all details of the address.
- 2.2 Specify the travel agency's legal entity: Corporation, Association, Limited Partnership, etc.

3.1 – The Registered Capital is the total of the share capital which a limited company is allowed (authorized) to issue. It presents the upper boundary for the actually issued share capital. Shares authorized = Shares issued + Shares unissued.

3.2 – The Paid-Up Capital is the amount of share capital paid by the shareholders. This may be less than the called up capital as payments may be in instalments ("calls-in-arrears")

3.3 - Indicate the minimum paid-up capital (3.2) required by the law in your country

3.4 – Insert VAT number according to the local country format.

4.3 – Complete this field except when your organization is a legal entity whose shares are listed on a security exchange or are regularly traded in an 'over-the-counter' market.

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

- 6.1 Indicate if your travel agency located at any airport.
- 6.2 The Company must be identified as a place of business for a travel agency.
- 7 Safe Box is not required.
- 8.1 According to the resolution 818g Paragraph 2.1.10, a GSA cannot be an accredited IATA travel agency.
 - GSA General sales agent.
 - Airline Representative office or Sales Agent

8.4 - Indicate the estimated gross amount of sales of IATA carriers of sales.

8.3 & Page 6 - Statement of international sales, only applicable for Res. 800. List of countries below

Afghanistan	Algeria	Angola
Brunei Darussalam	Gambia	Sudan
Burundi	Guinea	Tajikistan
Cape Verde	Islamic	Timor Leste
Christmas Island	Republic of Iran	Turkmenistan
Cocos (Keeling) Islands	Iraq	Uzbekistan.
Comoros	Israel	Equatorial Guinea
Democratic People's Republic of Korea (DPRK)	Laos (Peoples' Democratic Republic)	Guinea-Bissau
Democratic Republic of Congo	Liberia	Libya
Djibouti	Myanmar	Sao Tome and Principe
Eritrea	Sierra Leone	Somalia
Indian Ocean Islands	Armenia	Belarus
Madagascar	Bhutan	Maldives
Seychelles		