

Authority to Use Airside Application Form

Applicant (Vehicle Operator)						
Individual / Company Name:						
Email:						
Address:						
Telephone:						
/ehicle details						
Make:						
Model:		Colour:		Year:		
Registration No:		N	Motive Power:	_		
Special Features:						
s this vehicle state public road registered? Yes No						
Note: if the vehicle is not state registered the operator of the vehicle is responsible for ensuring that the vehicle serviceability, in accordance with the AVCH, is maintained at all times.						
s the new vehicle replacing an	existing vehicle in posse	ession of an <i>i</i>	AUA sticker? Ye	s	No	
nsurances Details – Certificate	of Currency must be at	tached/ Cop	y of the policy			
Insurer:						
Policy No:						
Amount of cover:						
Гуре of work						
Work being undertaken:						
_						
Area of Operation:						
Communication Equipment – I	Applicable					
Type installed:						
require that a CALL SIGN be:	Issued	Transferr	ed			
From:			Preferred:			



Need for Access – If Applicable
Explain the need for frequent and unescorted access to the manoeuvring area:
Vehicle Immobilisation
Explain the process in place if the vehicle is immobilised whilst airside:
Release and Indemnification
In consideration of being granted an Authority to Use Airside in accordance with this application, the
applicant agrees to release and indemnify HIAPL, its officers and employees and any persons
providing assistance to HIAPL in relation to all claims for damage to the vehicle in moving the vehicle
if the vehicle becomes immobilised on the movement area.
An Airside Vehicle Indemnity and Release form has been completed and formally executed.
Undertaking and Acknowledgement by the Applicant
I am duly authorised to complete this application form on behalf of the vehicle operator.
I have personally read the Airside Vehicle Control Handbook and agree to fulfil the requirements on
vehicle operators set out in the Handbook.
The vehicle operator undertakes to ensure that the vehicle is operated in accordance with the
handbook, that the required Insurance coverage shall be maintained, and that the vehicle's
registration will be maintained or that the vehicle will be maintained in a serviceable condition.
I also acknowledge that HIAPL may cancel or suspend this authority at any time.
Signature: Date:
Offices Use Only
Indemnity & Release form received: Yes
6 · 100 · 10 f · 10 D N D N/A D
Serviceability inspection form received: Yes No N/A
Application approved by: Date: