

Attachment D — Confirmation of Aerodrome Details and Key Personnel – Including Aerodrome Post Holders

Name and Address of Aerodrome:		
Name & Address		
Telephone:	Fax:	Email:

Name and Address of Aerodrome Operator:		
Name & Address		
Telephone:	Fax:	Email:

Accountable Manager				
Name / Title				
Telephone:	Email:	Post Holder?	YES <input type="checkbox"/>	NO <input type="checkbox"/>

Key Person responsible for Aerodrome Safety				
Name / Title				
Telephone:	Email:	Post Holder?	YES <input type="checkbox"/>	NO <input type="checkbox"/>

Key Person responsible for day to day provision of Aerodrome Operations				
Name / Title				
Telephone:	Email:	Post Holder?	YES <input type="checkbox"/>	NO <input type="checkbox"/>

Key Person responsible for Aerodrome Maintenance				
Name / Title				
Telephone:	Email:	Post Holder?	YES <input type="checkbox"/>	NO <input type="checkbox"/>

Key Person responsible for Air Traffic Services				
Name / Title				
Telephone:	Email:	Post Holder?	YES <input type="checkbox"/>	NO <input type="checkbox"/>

Key Person responsible for day to day Aviation Security				
Name / Title				
Telephone:	Email:	Post Holder?	YES <input type="checkbox"/>	NO <input type="checkbox"/>

Key Person responsible for Accounts Payable				
Name / Title				
Telephone:	Email:	Post Holder?	YES <input type="checkbox"/>	NO <input type="checkbox"/>

On behalf of the Aerodrome Operator, I confirm that the details for this Part 1 - Aerodrome Pre-Audit Assessment - Confirmation of Aerodrome Details and Key Personnel – including Aerodrome Post Holders are correct to the best of my knowledge.

Signed:

Name:

Organisation:

Date: