



**NATIONAL ADMINISTRATOR OF  
EUROPEAN REGISTRY AND KP REGISTRY**

**APPLICATION FORM: ADD OR AMEND AN AUTHORISED  
REPRESENTATIVE**

- Add an Authorized Representative (AR)**
- Retrieve an Authorized Representative**  
(to replace an AR, tick both boxes)
- Change an Authorized Representative role**

**Company name :** \_\_\_\_\_

**Account number:** \_\_\_\_\_

**INFORMATION ABOUT THE NEW AUTHORISED REPRESENTATIVE**

**All fields are compulsory**

**SURNAME:** \_\_\_\_\_ **Forename :** \_\_\_\_\_

**Date of birth:** \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ **Place of birth:** \_\_\_\_\_

**Business address (including country, state, and post code):** \_\_\_\_\_

\_\_\_\_\_

**Telephone number:** \_\_\_\_\_ **Mobile phone number<sup>1</sup>:** \_\_\_\_\_

**E-mail<sup>2</sup>:** \_\_\_\_\_

**Role of the Authorized Representative (AR) for the account, tick only one box:**

- Initiator:** can (only) initiate a transaction and a process such as addition of an account in the Trusted Account List (TAL).
- Approver:** can (only) approve a transaction or a process initiated by another AR.
- Initiator/Approver:** can initiate and transaction and a process, can also approve a transaction and a process (initiated by another AR).
- Read only:** cannot initiate or approve a transaction or a process.

**If you replace an AR, please specify his/her name :** \_\_\_\_\_

<p style="text-align: center;"><b>Original Signature Specimens (Two identical signatures)</b></p> <p style="text-align: center;">The signature must match the signature on your ID card or Passport</p>	<p>Signature 1</p>	<p>Signature 2</p>
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<sup>1</sup> For security reasons the same mobile number cannot be assigned to several people.

<sup>2</sup> For security reasons a same email address cannot be assigned to several people.

**NATIONAL ADMINISTRATOR OF  
EUROPEAN REGISTRY AND KP REGISTRY**

**APPLICATION FORM: ADD OR AMEND AN AUTHORISED  
REPRESENTATIVE**

**CONFIRMATION BY THE LEGAL REPRESENTATIVE**

**SURENAME:** \_\_\_\_\_ **Forename :** \_\_\_\_\_

**Date of birth:** \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ **Place of birth:** \_\_\_\_\_

- I certify that all information given in these Special Conditions is accurate.
- I have read and understood the regulations applying to the European Union Registry.
- I have read and understood the terms of the "Aviation Operator" section of the General Conditions of the Agreement to open and hold an account, and accept all of the provisions therein
- I do not wish the French Registry to include information relating to the name, address, locality, post code, country, telephone number, fax number or email address of the main and secondary authorised representatives for the account in its published reports.
- I understand and accept that all documents which I submit will be retained for a period of 15 years after closure of the account(s) to which they pertain.

**Date:** \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ **City:** \_\_\_\_\_

**ORIGINAL SIGNATURE OF THE LEGAL REPRESENTATIVE:**

The signature must match the signature on your ID card or Passport

**DOCUMENTS REQUIRED FOR THE AUTHORISED REPRESENTATIVE UNDER THE EUROPEAN REGULATION APPLICABLE**

- **Note - All documents must be dated less than 3 months, signatures must be original.**
- All documents submitted in a **language different from English or from French** must be translated by a sworn translator into English or into French.

<p><b>1.</b> Notarized, legalized or certified true copy by the competent authority of a current valid <b>National Identity Card or passport.</b> For the AR on operator and aircraft holding accounts, we accept self certification.</p>
<p><b>2.</b> Notarized, legalized or certified true copy of an <b>evidence of personal domicile.</b> For France and/or operator holding accounts, a simple copy is acceptable.</p>
<p><b>3. Original extract of criminal record</b> delivered by the national competent authority</p>

**Please send the original form and all documents required to the following address:**

National Administrator of European Registry and KP Registry  
Caisse des Dépôts – DPS – DFi- P0F400  
12, Avenue Pierre Mendès France  
75013 PARIS - FRANCE