IRAN ASEMAN AIRLINES (EP)

APPLICATION FORM OF REPRESENTATION AS

PASSENGER SALES AGENCY (PSA)

Please complete the following application form and forward to review by management of Iran Aseman Airlines. Please note that application does not mean the appointment as GSA in your area. Non-submission of all documents requested will disqualify you as an applicant. The attachment of all required documents is necessary.

1.	Registered Name of Organization: (Enclose required documents
2.	Business Address:
1.	Date of Establishment:
3.	Registration No
1 .	Facilities Available:
	Telephone:
	Telefax:
	Email:
	Website

6.N	6.Nature of Business:		
	 7.	 N	ature of Business Entity:
	Sole Proprietorship:		
	Partnership:		
		Ας.	sociation:
		,	
		····	
		Co	rporation etc
	•		
	8.	Co	ompany's Status (If applicable)
	8.1 If Subsidiary, state name of Parent Company		
	8.2 If Parent company, list name of Subsidiary:		
	9. Type of Company: (Company's)		
9.1	lf	com	pany is registered under the companies act, please
		a)	State amount of authorized Capital:
		b)	State amount of issued and paid up capital: (Enclose proof of paid up Capital)
		c)	Provide Article & Memorandum of association:
		d)	Provide latest Annual report:
		e)	Latest and previous balance sheet:
		f)	Cash-flow and turn-over according to bill and invoices:
		g)	Provide Company's brochure:
		h)	Provide Company's certificates, diplomas and licenses:
		i)	Provide names and addresses of company secretary and director specifying the shares held:

	Name	Address	Shares Held
	9.2.If Business is Part	nership:	
	a) State total Capital Con	ntribution:	
	b) Provide latest audited	Financial Statement:	
	c) Provide names and a	ddresses of all partners specifying an	nounts of contribution:
	<u>Name</u>	<u>Address</u>	Shares Held
	9.2.If Sole Proprietor	ship, Please	
	a) State full Name and a	lias if any	
	b) Provide latest Audited	financial Statements	
10.	Address of Branch Office(s) if any	
11.	State your appointed Sale	s Agents or Marketing/Sales outlets	if any
12.	How long has your Agenc	y been in the travel Trade	
13.	Are you a member of a Tr	avel Trade Organizations? If yes plea	ase name the Organizations:
14.		by the International Air Transport Ass our IATA agency code:	
15.	Are you an appointed Tra	vel Agency by your National Carrier?	
If So,	please indicate:		
	a) Date of Appointment		
	b) Agency Numeric Code	9	
	c) Are you holding ticket	stock of the national carrier	
If YE	S. give details as to the cred	lit facilities accorded to you	

	16. Are you acting as General Sales Agents for any Airlines?		
	lf	so, Specify:	
	a)	Name of Airline: Use Airline Prefixes:	
	b)	Rate of Commission:	
	c)	Date of Appointment:	
17.	In	dicate types of clients/customers that the a	gency handles:
	(F	Professional, Businessmen, Government	Agencies , International Organizations, NGO etc).
18.		he ways and variety of services offered to c	
19.	Р	lease list your contacts in the government n	ninistry:
	•		
20.	N	Name and address of your banker(s) (Enclose banker's reference in scaled envelope)	
		Name	Designation

IV	lame of Bank	Accounts	Interest Rate %	Period
22.	Please provide in industry:	detail, experience of your k	ey personnel in the travel tr	ade and aviation
23.	Total staff Strengt	h:		
24.	Provide following	data (where applicable)		
S	ales Potential	No. of PAX	International	Domestic
25.	If appointed as Ge	eneral Sales Agent:		
	a) Do you agree	to provide a minimum Banl	Guarantee to hold Iran As	eman Airlines ticket stoo
	b) Specified spa	ce or building to Aseman Ai	rlines:	
	c) Specified ant	icipated sales for the first ye	ear	
	•		ms for future:	
	Are you interested	I in becoming GSA or Carg	o Sales or Both?	
26.				
	<u>.</u>			
	_	computerized system for a		

29.	your office equipped with a computerized reservation system?	
30.		
31.	Type of stamping/Validating machine used in office. (Manual / Electric / Rubber Stamp)	
32.	Do you have adequate facilities for storing Airline accountable documents	
	If so, please specify	
33	3. The laws and rules of Finance Affairs:	
	32. Comments for Consideration:	
The undersigned certifies that the particulars contained herein are true and correct and will form part of Sales Agency Agreements if and when such an agreement is executed.		
SIGNATURE:		
Name of Applicant		
Director		
Date:		