Gold Coast Airport
A Queensland Airports Limited Company

SECOND TIER CAR RENTAL OPERATOR DETAILS 2013/2014

1. **Application Type:** (Please select the appropriate option)

☐ **First-** Second Tier Car Rental Licence
☐ **Renewal**- Second Tier Car Rental Licence

2. **The fee structure for the 2013/2014 financial year is as follows:**

Administration Fee: (required from all operators)

☐ $320.00 including GST

Car Rental Parking Bay: (if approved by Gold Coast Airport)

☐ $5,000.00 inc GST per parking bay per annum; or
☐ $1,250.00 inc GST per parking bay per quarter (option only available if purchasing 2 or more parking bays)

Total Amount Payable to Gold Coast Airport: $_____

Number of Parking bays required:_____

3. **Payment**

Payments can be made either via Direct Deposit to the below account, or by cheque- payable to the Gold Coast Airport.

Account Name: QAL FINANCE PTY LTD
Bank: COMMONWEALTH
BSB: 064-000
Account #: 11499436

Please quote your company name in the transfer description box for tracking of the payment and ensure ALL remittances are emailed to jyi@qldairports.com.au or faxed to 07 5536 2838.

Payment Method: (please select)

☐ Bank Transfer
☐ Cheque

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4. **Licensing Details:** (Please complete the following in full)

Name of company to be licenced:	
Registered Office Address:	
Company ABN:	Directors Name:

5. **Company Details:** (Please complete the following in full)

Trading Name(s):	
Postal Address:	
Name of first point of contact:	Telephone Number:
Email Address:	Web Address:

6. **Required Documentation:** (Please provide the following documentation)

☐ A copy of the company public liability insurance ($20,000,000 is required); and
☐ A copy of the company accreditation

7. **Applicants Acknowledgement:**

The applicant acknowledges that:

☐ GCAPL has made no representations in relation to the viability of operations from the Airport and/or as to future passenger numbers and/or potential business available to the Applicant from the Airport;

☐ GCAPL is relying on the statement hereby given that the Applicant has adequate business experience and financial resources to fulfil its obligations under the Licence to be granted by GCAPL

Signature of Applicant:

Title/Position:

Date:

PLEASE SEND THIS COMPLETED FORM FOR PROCESSING TO:

Gold Coast Airport
Ground Transport Department
PO Box 112, Coolangatta QLD 4225