Gold Coast Airport
A Queensland Airports Limited Company

GROUND TRANSPORT OPERATOR DETAILS 2013/2014

1. **Business Type:** (please tick)

- ☐ Ground Transport Operations (BUS)
- ☐ Ground Transport Operations (LIMOUSINE)
- ☐ Ground Transport Operations (BUS AND LIMOUSINE)

2. **Airport Access Fee Per Airport Visit:** (for information purposes only)

Bus	**$7.00/visit**	(large bus parking facility)
Small Bus/Limousine	**$3.00/visit**	(small bus/limousine parking facility)

3. **Administration Fee:** (please tick)

- ☐ 1-5 Vehicles $ 90.00
- ☐ 6-10 Vehicles $130.00
- ☐ 11+ Vehicles $150.00

4. **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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5. **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 eg Australian Standards, Codes of Conduct, TSC Permits or Licence to Operate

6. **Company Details:** (please complete in full)

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

7. **Vehicle Registration Numbers:**

Please provide registration details of vehicles to be licenced at Gold Coast Airport:

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8. **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