

ACAAI



# THE AIR CARGO AGENTS ASSOCIATION OF INDIA

APPLICATION FORM

&

Questionnaire

**(COMMERCIAL MEMBERS)**

# APPLICATION FORM

To,  
The Hon. Secretary General  
The Air Cargo Agents Association of India  
Mumbai

Dear Sir,

We, \_\_\_\_\_  
hereby apply for the COMMERCIAL Membership of your Association and if elected.

1) I / We hereby solemnly promise to abide by the rules and regulations of The Air Cargo Agents Association of India and to observe a high ethical standard in the conduct of our Business without reservation or equivocation of any kind, consistent with the regulations in force from time to time. We also note and accept that any member who shall act to the detriment of or against the interest of the Association or who shall fail in the observance of or violates any of the Articles of Association or the bye-laws of the Association or violates any of the rules of business conduct or the covenant established by the Association or whose conduct or action in the opinion of the Managing Committee is improper or is prejudicial to the Association or is detrimental to the interest of the Air Cargo trade, may after due inquiry by either censured, suspended or excluded from the Association by the Managing Committee for which action the Managing Committee shall not be bound to assign any reason.

2) To implement the above, I/ We declare that no part or whole of my/ our earnings, by way of commission or otherwise, as an inducement inconsistent with fair trading will be paid to my / our clients as a commission in respect of business received from them, nor will I / We employ brokers or others, in the conduct of my / our business, i.e. apart from those Bonafide salaried employees working for me / us.

3) I / We may however co-operate with other members only of the Association and divide the commission so earned with the said members provided that the regulations of the carriers concerned are not violated.

4) I / We also consider it as an obligation to assist the Association in the detection of any breach or breaches of such solemn undertaking on the part of any Agent or Agents who may be party to this Covenant.

5) I / We agree and undertake to intimate to the Association any change in my / our status, constitution and/ or conventional or corporate name by any reason whatsoever within 30 days of any such change being effected.

Date:  
Address of Head Office/Regd. Office:

Yours truly,

Proprietor/Partner/Director/Authorised Signatory

# QUESTIONNAIRE

To be filled up by an applicant wishing to become a Commercial Member of  
The Air cargo Agents Association of India (ACAAI)

01.	Name of the organization	
02.	When established?	
03.	a. Full address, telephone numbers and telegraphic address of the office making this application. b. Full address of the Head Office of Firm or registered office of company	
04.	Names of the two individuals and their designations who will represent your organization on the Association. Their residential addresses and telephone numbers	
05.	State whether the applicant is a sole proprietary concern, partnership firm, a Private Limited company or a Public Limited company or a Government undertaking/ corporation	
06.	Give the Name/s of the Proprietor/ Partners or the Directors of the Company, as the case may be	

07.	State the paid-up capital as on date (in case of proprietorship or partnership, state the capital invested).	
08.	a. What is your principal business and how long has this business been established.	
	b. If a clearing and forwarding agent, please give the No. and date of the CHA Licence.	
	c. If an Airline: Has the applicant appointed any General Sales Agents in India? If so, give a complete list giving their names and addresses and territories allotted.	
	d. If a transport operator, is the applicant  i) A Member of any Transport Owners Association?  ii) Recognized by the Government? Give details.	
09.	State places where the applicant has branch offices with their full addresses.	
10.	Give the strength of the applicant's Employees	
11.	Is the applicant a member of any Chamber of Commerce, Trade Associations, Societies, etc. If so, state Names	

12.	State the names of the applicant\ Bankers, with their full addresses	
13.	What is your Annual Gross Turnover? (Please attach certificate by a Chartered Accountant)	
14.	Has the applicant or any branch of the applicant ever been censured disqualified or penalized by any Associations, Companies or Authorities? If so, give Facts of cases in brief and the result or outcome thereof. Attach additional sheet. if	
15.	Give any other details that will enable the Committee to consider the application. for membership of the Association	

We hereby certify that the information given above is true, correct and accurate to the best of our knowledge and belief and that no information that may be relevant to the above questions has been suppressed or withheld. We agree to pay all fees of the Association as established from time to time.

Date:     /     / 200

Signature and stamp of the Company

**DECLARATION OF PROPOSER**

The above mentioned application is known to us and the information supplied above by the applicant is to the best of our knowledge true and correct. We hereby propose the applicant to the membership of the Association.

Name & Seal of the Proposer

Signature and Stamp of the Proposer  
(Active Member)

Date: / / 200

(Accredited representative only)

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**DECLARATION OF SECONDER**

The above mentioned application is known to us and the information supplied above by the applicant is to the best of our knowledge true and correct. We hereby propose the applicant to the membership of the Association.

Name & Seal of the Seconder

Signature and Stamp of the Seconder  
(Active Member)

Date: / / 200

(Accredited representative only)

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**FOR OFFICE USE ONLY:**

a) Recommendation of the Region: Recommended / Not recommended / Deferred on  
.....200

b) Decision of the Managing Committee: Approved / Non Approved / Deferred / Sent for  
Reconsideration of the region on .....200

Signature for  
Chairman of Meeting.....