SCAA Form 2

Application for AAR-…….. ☐ **Initial** ☐ **Change** ☐ **Renewal**

1. Registered name of applicant: ……

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2. Trading name (if different): ……

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3. Addresses requiring approval: ……

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Tel: ……

Fax: ……

E-mail: ……

5. Terms of approval and scope of work relevant to this application: ……

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6. Position and name of the Accountable Manager: ……

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7. Signature of the Accountable Manager: ……

8. Place: ……

9. Date: ……