|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **To be completed by Air operator or Approved Maintenance Organization** | | | | | | | |
| **Section 1A. To be completed by all applicants** | | | | | | | |
| 1. Name and mailing address of company (include business name if different from company name) | | | | | | 1. Address of the principal (main) base where operations will be conducted, include address of secondary base of operation, if appropriate (do not use a post office box). | |
| 3. Proposed Start-up Date: | | | | | | 4. Requested company identifier in order of preference  1. 2. 3. | |
| 5. Management and Key Staff Personnel | | | | | | | |
| Name (Surname)  (First Name/s) | | | Title | | | | Telephone & address if different from company (Include country code) |
|  | | |  | | | |  |
| Section 1B. To be completed by Air Operator and/or Approved Maintenance Organisation | | | | | | | |
|  | Air Operator intends to perform its maintenance as an AMO (Complete Block 7 & 8)  Air Operator intends to arrange for maintenance and inspections of aircraft and associated equipment to be performed by others (Complete Blocks 7 & 11)  Approved Maintenance Organisation (Complete Block 8) | | | | | | |
| 1. Proposed type of operation (Check as many as applicable) | | | | 8. Proposed type of Approved Maintenance Organisation Rating(s) | | | |
| Air Operator Certificate – CV-CAR 8/9  Passengers and Cargo  Cargo Only  Scheduled Operations  Charter Flight Operations | | | | | Approved Maintenance Organisation - CV-CAR 6  A - Aircraft  B - Engine  C - Components other than complete engines or APUs  D - Specialised Service | | |
| Section 1C. Blocks 9 and 10 to be completed by Air Operator. | | | | | | | |
| 1. Aircraft Data (For foreign registered aircraft, please provide a copy of the lease agreement) | | | | | 1. Geographic areas of intended operations and proposed route structure | | |
| Numbers and types of aircraft (By make, model, and series) | | Number of passengers seats or cargo payload capacity | | |  | | |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Section 1D. To be completed by all applicants** | | | | | |
| 1. Additional information that provides a better understanding of the proposed operation or business  (Attach additional sheets, if necessary) | | | | | |
| 1. Proposed Training (Aircraft and/or Simulator)   (Attach additional sheets, if necessary) | | | | | |
| 1. The statement and information contained on this form denotes an intent to apply for a AAC certificate. | | | | | |
| Type of Organisation: | | | | | |
| Signature |  | Date (day/month/year) | | | Name and Title |
| Section 2. To be completed by AAC Official | | | | | |
| Received by (Name and Office): | | | | Date received (day/month/year) | |
| Date forwarded to Civil Aviation Authority  (day/month/year): | | | | For:  Action  Information only | |
| Remarks: | | | | | |
| **Section 3. To be completed by AAC** | | | | | |
| Received by: | | | Pre-application Number: | | |
| Date (day/month/year): | | | Assigned Certification Number: | | |
| Local office assigned responsibility: | | | Date forwarded to local office: (day/month/year) | | |
| Remarks: | | | | | |

**ATTACHMENT**

SECTION 1A. All applicants shall complete this section.

1. Enter the company’s official name and mailing address. Include any other business name if different from the company name).
2. This address shall be the physical location where primary operating activities are based. It is where the offices of management required by regulation are located. If the address is the same as item 1, enter “same.” Include secondary business addresses of operation and identify the type of operation conducted.
3. Enter the estimated date when operations or services will begin.

* Should not be less than 90 days.

1. This information will be used to assign a company identification number. You may indicate up to three, three-letter identifiers, such as ABC, XYZ, etc. If all choices have been assigned to other operators or approved maintenance organisations, a randomly selected number will be assigned.
2. Enter the names, titles, and telephone numbers of required management and key staff personnel. This shall include the accountable manager, base maintenance manager, line maintenance manager, workshop manager and quality manager (CV-CAR 6).

SECTION 1B. All applicants shall complete this section, as appropriate.

1. Indicate if the air operator intends to perform maintenance as an Approved Maintenance Organisation (AMO) or intends to contract out all or part of its maintenance.
2. The proposed type of operation shall be indicated. Check as many boxes as apply.
3. The proposed type of maintenance organisation and ratings shall be indicated. Check as many boxes as apply.

SECTION 1C. Air Operators shall complete Blocks 9, 10.

Aircraft Data is to be provided here. Indicate number and types of aircraft by make, model, series, and number of passenger seats or cargo payload capacity. For foreign registered aircraft, provide a copy of the lease agreement.

1. Indicate geographic areas of intended operation and proposed route structure.

SECTION 1D. All applicants shall complete this section.

1. Show any information that would assist AAC personnel in understanding the type and scope of operation or services to be performed by the applicant. If an air operator intends to arrange for maintenance and inspections of its aircraft and/or associated equipment identify the approved maintenance organisation selected and a list of the maintenance or inspections it proposes to perform. Also provide all written contracts with this form, if applicable.
2. Identify the Proposed Training.

For AOCs identify the type of aircraft and/or simulators intended to be used.

For AMOs, identify the type of aircraft by make and model. In addition identify the type of training that the Quality Assurance staff, certifying staff and maintenance personnel will receive based on the ratings requested.

1. The Prospective Operator Pre-assessment Statement (POPS) denotes an intent to seek AAC certification as an air operator or approved maintenance organisation. It must be signed as follows:

|  |  |
| --- | --- |
| Type of Organisation | **Authorised Signature** |
| Individual | Owner or Accountable Manager |
| Partnership | At least one partner or Accountable Manager |
| Company, corporation, association, etc. | At least one authorised Officer or Accountable Manager |

**SECTIONS 2 AND 3**: For AAC Use