Application for approval or revision of a Minimum Equipment List



Note: The CAA Standard Rate hourly charge applies.

Instructions and advice for completing this Application Form

Entries should be typed or printed in block letters.

2.	Forward completed ap	oplication to:	Manager Aircr Civil Aviation A PO Box 3555 Wellington 614	uthority	ion			
Section	on A: Aircraft Op	erator Detail	s					
a.	Legal Name of Orga	nisation:						
b. Client ID (if known)								
to pro New and t	Address for Service: tion Act, s8, requires a ovide an address for s Zealand (ie, a physicato promptly notify the Echanges.	pplicants ervice in al address)						
Tel:		Email:						
	al Address: (If differen ess for Service.)	t from						
d.	Person who can be	contacted for	further information	concerning	this application:			
u.	r croon who can be t	Name:	raturer information	oonooning	тпо аррпоанот.			
		Position:						
Tel:		Email:						
Section	on B: MEL Detail	s						
А	Aircraft type and model to which the MEL applies:							
MEL Name, Revision Number & Date:								
MMEL, Revision Number and Date:								
Applicable Operating Rule(s) for MEL (e.g. 91, 135):								
Section	on C: Application	Туре						
	New Iss	ue 🗌	Revision	Tempo	orary Revision			
Section	on D: Application	Checklist						
Does	the MEL contain:							
	A List of Effective Pa	ages to define	the MEL					
Defect recording and tracking procedures or reference to their location in another document:								
	Reference to the base document MMEL:							
	(O) Operating and (M) Maintenance Procedures (tick one):							
			thin the MEL Docu					
	-		arks/Comments fo		able item			

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specific to the	t reflect the current approved MMEL wording for the type certificated aircraft except where it is NZ CAA Operating rules, the operator and the individual aircraft (see template on the CAA website ording options).
For a New Issu	ue:
Details a	and justifications of deviations from the MMEL are described below or on an attached sheet.
For a Revision	
Details o	of what has changed and why are described below or on an attached sheet.
Description and	d Justification for Deviations/Changes:
Item	Description and Justification
Please attach fu	urther details on a separate sheet if necessary.
Section E:	Declaration
	understand the Guidelines for Producing a MEL (CAA website) and hereby apply on behalf of the d in Section A for the approval of the minimum equipment list specified in Section B above.
Full Name:	
Signature:	Date: /

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