

***Part 145 application for issue, renewal, or amendment of aircraft***

***maintenance organisation certificate***

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| Application requirements and instructions for completing the form1. *The CAA Standard Rate hourly charge applies. Follow the link for information on* [*fees and charges*](https://www.aviation.govt.nz/about-us/what-we-do/how-we-are-funded/fees-levies-and-charges/)*.*

***NOTE:*** *If an organisation is being invoiced, you MUST obtain the details AND signature of the person authorising the payment in Section 2.*1. *Please ensure all documents are enclosed. No application will be processed until all required documentation is received.*
2. *The application must include*
	* *a completed rule compliance matrix* [*24145-02*](https://www.aviation.govt.nz/about-us/forms/Filter/?SearchTerm=&Rule=119) *for* ***initial issue*** *and* ***renewal****;*
	* *a complete exposition for* ***initial issue*** *and* ***renewal*** *(unless unchanged), or the relevant amended pages for* ***amendment****, as required by rule 145.67.*
3. *Further notes and instructions are included in the grey margins of the different sections.*
4. *Use additional sheets such as those included at the end of the form to provide further details and explanations that do not fit in the original sections of the form.*
5. ***Submit the completed application and supporting documentation to either:***

***Email:*** *certification@caa.govt.nz****Post:***  *Certification Unit, Civil Aviation Authority, PO Box 3555, Wellington 6140* |

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| **Initial issue [ ]**  | **Renewal [ ]**  | **Amendment [ ]**  |

# Organisation details

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| --- | --- | --- |
| CAA Participant number (*if known)* |       |  |
| Legal name of Organisation  |       |
| *A certificate will be issued only to a registered company, a partnership, a sole trader or an incorporated society.For a registered company, submit a copy of the* ***Companies Office Certificate of Incorporation*** *for initial issue or for an amendment involving a change to the legal name of the organisation.* |
| Trading name *(if any)* |       |
| Address for service*The Civil Aviation Act 2023, section 73, requires applicants to provide an address for service in New Zealand (i.e., a physical address, not a P.O. Box) and to promptly notify the Director of any changes.* | Postal address *(if different from Address for Service)* |
|       |       |
|        |       |
|       |       |
| Post code |       | Post code |       |
| Phone |       | Phone |       |
| Email |       | Email |       |
| Location of maintenance facilities*(if different from above)* |       | *[ ]  This is a new location* |
|       | *[ ]  This is a new location* |

|  |  |
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| Your reference – or –  |       |
| Details of the person who may be contacted for further information |
| Name |       | Position |       |
| Tel |       | Mobile |       |
| Email |       |

# Details for invoice

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| *Please provide the name of the organisation or applicant and address for the invoice to be sent. If an organisation is being invoiced, you MUST obtain the details AND signature of the person authorising payment.* |
| The invoice is to be sent to | [ ]  Applicant  | [ ]  Organisation |
| Applicant or Organisation name |       | CAA Participant No |       |
| Name of the person authorising payment *(if applicant, N/A)* |       | Purchase Order No *(if applicable)* |       |
| Title/Position within the company  |       |
| Email |       | Phone |       |
| Postal address*(for the invoice to be sent to individual or organisation)*  |       |
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| Signature*(of the applicant or person within the organisation authorising payment)* |  |  |

# Reason for application

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| *Indicate the type of application being made, then complete the relevant sections of the form.* | Initial issue of certificate | **[ ]**  | Complete all sections  |
| Renewal of certificate | **[ ]**  | Complete all sections |
| Amendment requiring prior CAA acceptance as per rule 145.105(d) | **[ ]**  | Complete sections 1, 2, 3, 11 and only those sections appropriate to the amendment request |

# Questionnaire

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| *These two questions must be answered for the initial issue and for the renewal of a certificate.* | Has the organisation been convicted for any transport safety offence in the last five years or is the organisation presently facing charges for a transport safety offence? |  |
| Has the organisation previously had an application for an aviation document rejected or has an aviation document held by the organisation been suspended or revoked? |  |
| *Note:*  | *If “Yes”, provide details with this application on separate sheets.* |

# Rating(s) applied for (145.11)

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| A1 **[ ]**  | A2 **[ ]**  | A3 **[ ]**  | A4 **[ ]**  | P1 **[ ]**  | E1 **[ ]**  |
| C1 **[ ]**  | C2 **[ ]**  | C3 **[ ]**  | C4 **[ ]**  | C5 **[ ]**  | F1 **[ ]**  |
| S1 **[ ]**  | S2 **[ ]**  | S3 **[ ]**  |  |  |  |

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| Procedures for changing the scope within a rating*(provide references to your exposition)* |       |

# Brief summary of the scope of work to be carried out

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| *Provide references to your exposition.* |       |

# List of Senior Persons

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| *For initial issue, renewal, or amendment, separate forms must accompany this application for each of the nominated senior persons as shown below.* |
| ***Initial issue:****Appropriate fit and proper person form (*[*24FPP*](https://www.aviation.govt.nz/assets/forms/24FPP.pdf) *or* [*24FPPDEC*](https://www.aviation.govt.nz/assets/forms/24FPPDEC.pdf))*, and CV* | ***Renewal:****- Changed persons:**Appropriate fit and proper person form (*[*24FPP*](https://www.aviation.govt.nz/assets/forms/24FPP.pdf) *or* [*24FPPDEC*](https://www.aviation.govt.nz/assets/forms/24FPPDEC.pdf))*, and CV* |
| ***Amendment:****Appropriate fit and proper person form (*[*24FPP*](https://www.aviation.govt.nz/assets/forms/24FPP.pdf) *or* [*24FPPDEC*](https://www.aviation.govt.nz/assets/forms/24FPPDEC.pdf))*, and CVis required when a senior person is added to the certificate.For all other types of amendments where there are no senior person changes to the certificate, no fit and proper person form and CV are required.*  | *- Unchanged persons:**Their names and titles must be confirmed in this section and appropriate fit and proper person form (*[*24FPP*](https://www.aviation.govt.nz/assets/forms/24FPP.pdf) *or* [*24FPPDEC*](https://www.aviation.govt.nz/assets/forms/24FPPDEC.pdf))*, must be included.**They need not submit a CV where they are continuing in their CAA accepted senior person role.**However a CV is required if there has been changes such as additional qualifications or they have taken up other senior person positions for other Organisations.* |
| Nominated persons area(s) of responsibility as per rules 145.51(a) and 145.68(1) (as applicable) | Name & company title | CAA Participant No. (if known) |
| **Chief Executive** |       |       |
| **Control and Direction of Maintenance** |       |       |
| **Personnel Authorisations** |       |       |
| **System for Safety Management** |       |       |
| **Aeronautical Product Acceptance\*** |       |       |
| **Inspection and Testing\*** |       |       |
| **Dispatch of Aeronautical Products and Issue of the Associated Release Notes\*** |       |       |
| ***\*These positions require approval only if an organisation is applying for or already has an “S” Rating.*** |
| *Indicate any senior persons that are being removed from the organisation’s certificate.* | Removed persons |
|       |
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# Number of persons to be employed (rule 145.51(a)(3))

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| --- | --- | --- | --- | --- |
| 1-5 **[ ]**  |  6-10 **[ ]**  | 11-50 **[ ]**  | 51-100 **[ ]**  | > 100 **[ ]**  |

# Procedure for authorising persons to certify maintenance (145.67(a)(8)(xiii))

|  |  |
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| *Provide references to your exposition.* |       |

# Facility *(list any changes to facility)*

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| *Provide references to your exposition.**Indicate any changes such as addition / removal of buildings or locations.* |       |

# Safety Management System (145.65) *(complete if the change is a material change).*

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| *Provide references to your exposition.**CAR 145.105 (d) (7) requires the Director to make prior acceptance if there is a material change to the safety management system.* |       |

# Exposition

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| *Please list the manuals that constitute the* ***exposition*** *required by CAR 145.67.**For* ***renewal*** *list the publications already held by CAA and their latest amendment status.* | Manual Titles | Amendment No. and date |
|       |       |
|       |       |
|       |       |
|       |       |

# Applicant’s checklist

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| *Please ensure all documents are enclosed.* *Applications which are incomplete or lacking any required documents will not be processed.* | 1. All necessary sections completed
 | **[ ]**  |
| 1. Completed rule compliance matrix enclosed
 | **[ ]**  |
| 1. Completed or amended company exposition enclosed
 | **[ ]**  |
| 1. Appropriate fit and proper person form (24FPP or 24FPPDEC) and CV for the nominated senior persons enclosed
 | **[ ]**  |
|  | 1. Payment made (as applicable)
 | **[ ]**  |
|  | 1. Purchase order number (operational)
 | **[ ]**  |

# Declaration by Chief Executive or Delegated Senior Person

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| *The provision of false information or failure to disclose information relevant to the grant or holding of an aviation document constitutes an offence under sections 107 and 362 of the Civil Aviation Act 2023 and is subject, in the case of a person other than an individual, to a maximum fine of $100,000.* | I have obtained a current copy of NZCAR Part 145, and have read and understood the contents as they apply to this application. I also have a current copy of AC145-1, and CAR Parts 12 and 43 as applicable.This application is made for and on behalf of the organisation identified above. I certify that I am empowered by the organisation to ensure that all activities undertaken by the organisation can be financed and carried out in accordance with the requirements of the Civil Aviation Act 1990, Section 12. |
| I declare that, to the best of my knowledge, the statements made and information provided in this application and attachments are true and correct. |
| Full Name of Chief Executive or Delegated Senior Person |       | Participant number(if known) |       |
| Signature |  | Date of application |       |