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| 1. Your Reference | Please provide a brief, unique identifier that we will use to refer to your application |

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| 2. Applicant Data | | |
| **2.1 Name and Address** (Registered (business) name and address/legal seat of the company) | (Company) Name |  |
| Street Address |  |
| Post Code |  |
| City |  |
| Country |  |
| **2.2 Contact Person**  (responsible for this application) | Title | Mr  Ms |
| Full Name |  |
| Job Title |  |
| Phone / Fax |  |
| Email |  |

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| 3. Identification of Activity | |
| Major Change | Major Repair |

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| 4. Product Identification | | | | | |
| **4.1 Category** | | | | | |
| Aircraft  Balloon | Rotorcraft  Airship | | Engine  APU | | Propeller |
| **4.2 Applicability** | | | | | |
| **4.2.1 Single Type Design** | | Type Certificate Number | |  | |
| Type Certificate Holder | |  | |
| Type Name | |  | |
| Model(s) | |  | |
| Serial Number(s) | |  | |
| **4.2.2 Multiple Type Designs** | | Provide an Approved Model List (AML) | | Attached AML | |
| **4.3 Airworthiness Code** | | Please specify the applicable airworthiness code, e.g. CS-29 | | | |

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| 5. Original Approval (in case of revisions) | | |
| **5.1 CAA Approval No.** | This application is a request to revise Approval Number |  |
| Issued on |  |

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| 6. Description | |
| **6.1 Foreign Approval Ref.** (if applicable) | Enter DOA approval number or STC number |
| **6.2 Title** | Please limit to 40 characters |
| **6.3 Description** | Please provide a brief description of the change or repair |
| **6.4 Affected Areas**  (including manuals) | MEL  ICA  AFM  Noise  W&B  OSD  Other\* |
| \* Enter if other information is applicable |

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| 7. Declaration and Submission | | |
| **7.1 Applicant’s Declaration** | | |
| I declare that I have the legal capacity to submit this application to the CAA and that all information provided in this application form is correct and complete.  I have understood that I am submitting an application for which fees or charges will be levied by the CAA in accordance with MCAR-187, as last amended and available from <https://www.caa.gov.mv/>.  I declare to be aware that fees or charges must be paid whether or not the application is successful and that they might not be refundable. Moreover, I declare that I am aware of the consequences of non-payment. | | |
|  |  |  |
| Date | Name | Signature |
| **Important Note:** The CAA cannot accept applications without signature. Please make sure that you sign the application. | | |
| **7.2 Submission Instruction** | | |
| This application should be sent to airworthiness@caa.gov.mv (preferred) or regular mail to the CAA. Contact details of the CAA can be found on the CAA website <https://caa.gov.mv/contact>.  Payments shall be made via Bandeyri Portal or a purchase order shall be attached. | | |

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| 8. Review and Approval (CAA Use Only) | | |
| Payment Received  Technical Review  Approval of Affected Manuals  DOA Handbook (if app) | | |
| The change / repair is: | Approved  Not Approved | |
| Approval No: |  | |
| Remarks (if any): |  | |
|  |  |  |
| Date | Name | Signature/Stamp |