



# SOUTH AFRICAN CIVIL AVIATION AUTHORITY

281 Middle Street Nieu Muckleneuk Private Bag X08 WATERKLOOF 0145  
Tel: +27 12 346 5566 Fax: +27 12 346 1807

## AIRCRAFT DEPARTMENT

*THIS FORM MUST BE COMPLETED IN ACCORDANCE WITH THE REQUIREMENTS OF THE SA-CATS-AMO*

### APPLICATION FOR AN AIRCRAFT MANUFACTURING ORGANISATION APPROVAL

- APPLICATION FOR THE **ISSUE** OF A MANUFACTURING ORGANISATION APPROVAL  
 APPLICATION FOR THE **AMENDMENT** OF A MANUFACTURING ORGANISATION APPROVAL  
 APPLICATION FOR THE **RENEWAL** OF A MANUFACTURING ORGANISATION APPROVAL

**Notes**

- (i) An application for the issuing of a manufacturing organization approval, or an amendment thereof, must comply with the provisions of CAR 148.02.2, 148.03.02, or 148.04.02, as the case may be.
- (ii) An application for the renewal of a manufacturing organization approval must comply with the provisions of CAR 148.02.15, 148.03.15 or 148.04.15, as the case may be.
- (iii) Section 1 of this must be completed in all cases.
- (iv) Sections 2, 3 or 4 must be completed as applicable.
- (v) Submit applications to HOO Organisation Audits, SA CAA (This may be done by fax: +27 12 346 1807)
- (vi) For domestic organisations payment should accompany the application. Payment may be made at the offices of the CAA, or deposited into the bank account and proof of payment submitted with application.
- (vii) A quotation will be provided to foreign organisations after receipt of the application.

**Bank details:**

Standard Bank Brooklyn – **Branch Code 011245 (12 to be added if paid outside RSA)**  
**Swift Code – SBZAZAJJ** - Account No: 013 007 971  
**For over the counter payments at bank:** Reference: **MXXXXX CIN no : 057B**  
**For electronic/ wire/EFT transfers:** Reference: **MXXXXX CDI number : 69450084496**  
 (XXXXX is the approval number as it appears on the Approval Certificate)

### 1. PARTICULARS REGARDING THE APPLICANT

1.1 Name: of Organisation

1.2 Trade name (if applicable):

1.3 Physical address:	1.3 Postal address:
.....	.....
.....	.....
.....	.....

1.5 Telephone No:	1.6 Telefax no:
-------------------	-----------------

1.7 Cellular phone:	1.8 e-mail address:
---------------------	---------------------

1.9 Legal status of organisation (company / close corporation / trust / other )(Specify if 'other'):

.....

1.10 Registration number in the case of a company / close corporation / trust:

.....

1.11 Number of employees employed by the organisation:

1.12 The applicant / holder declares hereby that the particulars provided in this application are true in every respect.

NAME: ..... POSITION: Accountable/Quality Manager  
 .....  
**SIGNATURE** **DATE**

### 2. APPLICATION FOR THE ISSUE OF A MANUFACTURING ORGANISATION APPROVAL

2.1 Full particulars in respect of the individual / each responsible director / shareholder / partner / member / office bearer:  
(Attach a separate page if convenient)

Name	Position	Identity number	Nationality	Country of permanent residence
.....	.....	.....	.....	.....
.....	.....	.....	.....	.....

2.2 Category of rating applied for (please circle):  
M      P      T

**2.2 SUPPORTING DOCUMENTS SUBMITTED** – Please mark the appropriate block:.

(a) The Manual of Procedure	Yes	No
(b) List of approved persons and particulars of their competence	Yes	No

**3. APPLICATION FOR THE AMENDMENT OF A MANUFACTURING ORGANISATION APPROVAL**

3.1 Approval number: \_\_\_\_\_ 3.2 Expiry date: \_\_\_\_\_

3.3 Particulars of amendments applied for:  
.....  
.....  
.....

**3.4 SUPPORTING DOCUMENTS SUBMITTED** – Please mark the appropriate block:

(a) Manual of Procedure Amendment	Yes	No
(b) List of approved persons and particulars of their competence	Yes	No

**4. APPLICATION FOR THE RENEWAL OF A MANUFACTURING ORGANISATION APPROVAL**

4.1 Approval number: \_\_\_\_\_ 4.2 Expiry date: \_\_\_\_\_

4.3 Category or rating held (Please circle).    M      P      T

<p><b>Schedule of Payment CAR 187.00.25</b></p> <p><b>Issue of new approval</b>  Issue of approval with M or P or T rating    R2920.00 +vat  Each additional rating    R1170.00 +vat  Hourly rate to be invoiced on completion of inspection  R 480.00 +vat</p> <p><b>Amendment to approval (per rating)</b>    R 120.00 +vat</p> <p><b>Renewal of approval</b>  Application for annual renewal of approval    R 290.00 +vat  Plus renewal fee per rating (M or P or T)    R 230.00 +vat  Hourly rate to be invoiced on completion of inspection  R 480.00 +vat</p> <p><b>Issue of duplicate approval</b>    R 130.00 +vat</p>	<p><b>Bank details :</b>  Standard Bank Brooklyn-</p> <p><b>For electronic/ wire/EFT transfers :</b>  Reference : Mnnnnn wher nnnnn is the MPT number consisting of 5 digits (either add xx to fill 5 digits or cut off at 5)  CDI number : 69450084496</p> <p><b>For over the counter payments at the bank:</b>  Reference : as above  CIN NO: 057B</p>
--	--

<b>FOR OFFICIAL USE ONLY</b>	<b>Application accepted</b>
File Ref: J44/_____ Name _____	Signature _____ Proposed audit date: _____