



SWAZILAND CIVIL AVIATION AUTHORITY

APPLICATION FOR APPROVED MAINTENANCE ORGANISATION CERTIFICATE AND RATINGS

Civil Aviation Authority		Application for Approved Maintenance Organization Certificate and Ratings	
1. Approved Maintenance Organization Name, Number, Location and Address		2. Reasons for Submission	
a. Official Name of Maintenance Organization:	Number:	<input type="checkbox"/> Original Application for Certificate and Rating <input type="checkbox"/> Change in Rating <input type="checkbox"/> Change in Location or Housing and Facilities <input type="checkbox"/> Change in Ownership <input type="checkbox"/> Other (Specify)	
b. Location where business is conducted:			
c. Official Mailing Address of Approved Maintenance Organization (Number, Street, City, State, & Zip)			
d. Doing Business As:			
e. Line Maintenance Location			
3. Ratings Applied for: Ref: AMO CAR Reg. No.11			
Aircraft	Engine – Propellers	Equipment & Instruments	Accessories
<input type="checkbox"/> Class 1 Composite Small Aircraft <input type="checkbox"/> Class 2 Composite Large Aircraft <input type="checkbox"/> Class 3 Metal Small Aircraft <input type="checkbox"/> Class 4 Metal Large Aircraft	<input type="checkbox"/> Class 1 Piston <400hp <input type="checkbox"/> Class 2 Piston >400hp <input type="checkbox"/> Class 3 Turbine Engine <input type="checkbox"/> Class 1 Fix Pitch Props <input type="checkbox"/> Class 2 All other Props	<input type="checkbox"/> Class 1 Comm Equip. <input type="checkbox"/> Class 2 Nav. Equip <input type="checkbox"/> Class 3 Rader Equip. <input type="checkbox"/> Class 1 Instr. Mech. <input type="checkbox"/> Class 2 Electrical <input type="checkbox"/> Class 3 Gyroscopic <input type="checkbox"/> Class 4 Electronic	<input type="checkbox"/> Class1 Mech. Acc. <input type="checkbox"/> Class2 Electrical Acc. <input type="checkbox"/> Class3 Electronic Acc. <input type="checkbox"/> Class4 APU.

<input type="checkbox"/> Specialized Service (List Process Specification(s))			
4. List of Maintenance Functions contracted to an outside Organization:			
5. Applicants Certification			
Name of Owner (Include name(s) of individual Owner, all partners, or corporation name given the state, province, or country and date of incorporation)			
I hereby certify that I have been authorized by the approved maintenance organization identified in Item 1 above to make this application and that statements attached hereto are true and correct to the best of my knowledge.			
Date:	Authorized Signature:	Print Name of Authorized Signature:	Title: