



Section/division: **AIRWORTHINESS: AIRCRAFT MAINTENANCE ORGANISATION** Form Number: CA 145-01  
 Telephone number: **011-545-1000** Email [amo@caa.co.za](mailto:amo@caa.co.za)  
 Physical address: **Ikhaya Lokundiza, 16 Treur Close, Waterfall Park, Bekker Street, Midrand, Gauteng**  
 Postal address: **Private Bag X73, Halfway House 1685** Website: [www.caa.co.za](http://www.caa.co.za)

DETAILS OF BANK ACCOUNT FOR PAYMENT OF PRESCRIBED FEE					
Bank: <b>Standard Bank of SA Ltd</b>	Branch: <b>Brooklyn, Pretoria</b> Branch Code: <b>011245</b> Account Number: <b>013007971</b>				
COMPULSORY CLIENT PAYMENT CODE (to be completed on deposit slip)					
Service/transaction Fees: See CAR Part 187.00.23	<table border="1"> <tr> <th>Over the counter payments</th> <th>EFT, Internet, Wire, Electronic payments</th> </tr> <tr> <td><input type="text"/></td> <td><input type="text"/></td> </tr> </table>	Over the counter payments	EFT, Internet, Wire, Electronic payments	<input type="text"/>	<input type="text"/>
Over the counter payments	EFT, Internet, Wire, Electronic payments				
<input type="text"/>	<input type="text"/>				

APPLICATION FOR AIRCRAFT MAINTENANCE ORGANISATION APPROVAL

Please mark the appropriate block				
<input type="checkbox"/>	APPLICATION FOR THE <b>ISSUE</b> OF AN AMO APPROVAL			
<input type="checkbox"/>	APPLICATION FOR THE <b>AMENDMENT</b> OF AN AMO APPROVAL			
<input type="checkbox"/>	APPLICATION FOR THE <b>RENEWAL</b> OF AN AMO APPROVAL			
<b>Notes:</b>				
<p>(i) An application for the issuing of an Aircraft Maintenance Organisation approval, or an amendment thereof, must comply with the provisions of CAR 145.02.6.</p> <p>(ii) An application for the renewal of an aircraft organisation approval must comply with the provisions of CAR 145.02.11.</p> <p>(iii) Section 1 of this form is compulsory and must be completed by all applicants.</p> <p>(iv) Sections 2 are for an initial application.</p> <p>(v) Section 3 must be completed for amendment application.</p> <p>(vi) Section 4 must be completed for renewal application.</p> <p>(vii) <i>The application must be accompanied by all the necessary supporting documents.</i></p> <p>(viii) Submit applications to Manager: AMO Unit (<i>This may be done by e-mail to: <a href="mailto:amo@caa.co.za">amo@caa.co.za</a></i>).</p> <p>(ix) For domestic organisations payment should accompany the application (Fees in Part 187). Payment may be made at the offices of the SACAA, or deposited into the bank account and proof of payment submitted with application. Refer to schedule of payment for the transfer codes.</p> <p>(x) Application fee in respect of each facility contemplated in section 4.4 &amp; 4.5 of this form is payable in terms of point (ix) above.</p> <p>(xi) For International/Foreign Organisations, a quotation will be provided after receipt of the application.</p> <p>(xii) All application to be forwarded to <b><a href="mailto:amo@caa.co.za">amo@caa.co.za</a></b></p>				
<b>1. PARTICULARS REGARDING THE APPLICANT/HOLDER</b>				
1.1	Full name of organization			
1.2	Trade name, if applicable			
1.3	Full business/residential address			
1.4	Postal address			
	Postal code			
1.5	Telephone number			
1.6	Cellular phone number			
1.7	E-mail address:			
1.8	Company Registration number			
1.9	Number of employees employed by the organisation			
1.10	I declare that the particulars and documents provided with this application are true in every respect.			
	<table border="1" style="width: 100%;"> <tr> <td style="width: 33%;"><b>SIGNATURE OF ACCOUNTABLE MANAGER or DESIGNATE</b></td> <td style="width: 33%;"><b>NAME IN BLOCK LETTERS</b></td> <td style="width: 33%;"><b>DATE</b></td> </tr> </table>	<b>SIGNATURE OF ACCOUNTABLE MANAGER or DESIGNATE</b>	<b>NAME IN BLOCK LETTERS</b>	<b>DATE</b>
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<b>2. APPLICATION FOR THE ISSUE OF AN AMO APPROVAL</b>																
2.1	Full particulars in respect of key management personnel: (Attach Qualifications and CV's and a separate page if numbers exceed space provided)															
	Name						Position									
2.2	Category Rating applied for			A		B		C		D		E		W		X
	Limited rating (Stipulate)															
2.3	<b>SUPPORTING DOCUMENTS SUBMITTED –</b>								Document Reference			Remarks				
	a.	Manual of Procedure														
	b.	Quality Assurance system / Quality Management Manual														
		Safety Management Manual														
	c.	List of approved persons and particulars of their competence														
		Training Programme														
	e.	Proposed Operations Specifications (Ops Specs)														
	f.	Statement of Compliance														
		List of approvals currently held														
g.	Other (Contracts, Holding Lists, AMEL ,CV's etc)															
<b>3. APPLICATION FOR THE AMENDMENT OF AN AMO APPROVAL</b>																
3.1	Approval number			3.2			Expiry date									
	Full particulars in respect of changes in key management personnel: (Attach Qualifications and CV's and a separate page if numbers exceed space provided)															
3.3																
<b>Section 3A (to be completed by all Amendment applicants)</b>																
<b>PROPOSED TYPE OF RATINGS APPLIED FOR:</b>																
3.4	Airframe Categories		A		B		Power plant Categories		C		D		Helicopter		E	
	Avionics				W1		W2		W3		X1		X2		X3	
	Propeller			X4		Heat Treatment										
	NDT rating				Plating			Welding X5								
	Changes in management CAR 145.02.1 (5)(a) and CAR 145.02.1 (5)(b)										Y		N		(Attach)	
	Changes in MOP CAR 145.02.1 (5)(c) to (5)(f)										Y		N		(Attach)	
	<b>Specifications regarding limited ratings:</b>															
	a)															
	b)															
	c)															
d)																

<b>SUPPORTING DOCUMENTS SUBMITTED</b>		<b>Document Reference</b>	<b>Remarks</b>
3.5	a.	Manual of Procedure	
	b.	Quality Assurance system / Quality Management Manual	
		Safety Management Manual	
	c.	List of approved persons and particulars of their competence	
	d.	Training Programme	
	e.	Proposed Operations Specifications (OpsPecs)	
	f.	Statement of Compliance	
		List of approvals currently held	
	g.	Other (Contracts, Holding Lists, AMEL, CV's etc.)	
<b>Remarks:</b>			
(1)			
(2)			
(3)			
(4)			
3.6	Particulars of line stations affected:		
	a.		
	b.		
	c.		
	d.		
3.7	<b>TYPES OF AIRCRAFT/POWERPLANT (BY MAKE, MODEL, AND SERIES):</b>		<b>CORRESPONDING DEPTH OF MAINTENANCE:</b>
3.8	<b>PROPOSED TRAINING (AIRCRAFT/PROCESS):</b>		

<b>4.</b>	<b>APPLICATION FOR THE RENEWAL OF AN AMO APPROVAL</b>													
4.1	Approval number						4.2	Expiry date						
4.3	Category of rating held (please circle)	<b>A</b>		<b>B</b>		<b>C</b>		<b>D</b>		<b>E</b>		<b>W</b>		<b>X</b>
	<b>Special Processes</b> (specify)													
4.4	<b>Number of Line Station</b>						(Refer to Note X)							
4.5	<b>Number of Satellite Stations</b>						(Refer to Note X)							
<b>FOR OFFICIAL USE ONLY</b>														
<i>For initial certification: Please confirm that the project is log and a number has been registered against the Company Registration, and the billing details are correct.</i>														
<b>APPLICATION ACCEPTED</b>						<b>APPLICATION DENIED</b>								
File reference: J44/							Proposed Audit Date							
<b>COMMENTS</b>														
<b>SIGNATURE OF AIRWORTHINESS INSPECTOR</b>		<b>NAME IN BLOCK LETTERS</b>						<b>DATE</b>						