



Department: **Airworthiness: Aircraft Inspection & Registration**  
 Telephone number: 0860 267 435 Email address: [Registration@caa.co.za](mailto:Registration@caa.co.za)  
 Physical address: **Ikhaya Lokundiza, 16 Treur Close, Waterfall Park, Bekker Street, Midrand, Gauteng**  
 Postal address: **Private Bag X73, Halfway House 1685**

Form Number: CA-47A3

Website: [www.caa.co.za](http://www.caa.co.za)

**DETAILS OF BANK ACCOUNT FOR PAYMENT OF PRESCRIBED FEE**

Bank: **Standard Bank of SA Ltd** Branch: **Brooklyn, Pretoria** Branch Code: **011245** Account Number: **013007971**

**APPLICATION FOR DUPLICATE CERTIFICATE OF REGISTRATION**

1. **Supporting documents:** In each of the aforesaid applications contained herein, the supporting documents to accompany each application are set out in detail. Please pay meticulous attention to compliance therewith.
2. **Certification of supporting documents:** Kindly note that certification of all annexures must be made by a Commissioner of Oaths or Notary Public of a **non-interested party** on the front of every page and must include a full signature and ink stamp with full details, address and certification statement of such Commissioner of Oaths or Notary Public.
3. Where the required information cannot be furnished in the space provided, the information must be submitted as a separate memorandum and attached hereto.
4. The application plus all supporting documents must be submitted to the Director of Civil Aviation by emailing the documents to: [registration@caa.co.za](mailto:registration@caa.co.za)

<b>1.</b>	<b>PARTICULARS REGARDING THE REGISTERED OWNER</b>										
1.1	Full name of new owner or applicant										
1.2	Trade name (if applicable)										
1.3	Full business/residential address					1.4	Postal address				
	Postal code						Postal code				
1.4	Telephone: home					1.5	Telephone: office				
1.6	Cellular phone					1.7	Fax number				
1.8	E-mail address										
1.9	Legal status of applicant/registered owner (individual / company / close corporation / trust / partner/ other - specify):										
1.10	Registration number in the case of a company / close corporation / trust:										

1.11	Date of registration of company / close corporation / trust					
1.12	Full particulars in respect of the Individual / Each Director / Member / Trustee / Partner					
<b>Surname &amp; Initials</b>		<b>Position</b>	<b>Identity number</b>	<b>Nationality</b>		
<b>2.</b>	<b>APPLICATION FOR THE DUPLICATE CERTIFICATE OF REGISTRATION</b>					
2.1	I, the undersigned					
		<i>(Full name of director/member/trustee/partner/ person authorised in the resolution on page 4 hereof to act on behalf of the applicant/registered owner)</i>				
Hereby apply for the duplicate certificate of registration for the aircraft			<b>Z</b>		-	
Model / Type			Serial Number			
2.2	Reason(s) for application					
2.3	name and licence number of <b>aircraft maintenance organisation</b> authorised to apply for the duplicate Certificate of Registration					
AMO name			AMO License no.			
2.4	Hereby declare that the above particulars contained herein as well as the documentation submitted in support of the application are true and correct in every respect.					
<b>SIGNATURE OF APPLICANT</b>		<b>NAME IN BLOCK LETTERS</b>		<b>DATE</b>		
Capacity of signatory						
Name of company, close corporation, trust, partnership or other specify						
<b>2.5</b>	<b>SUPPORTING DOCUMENTS:</b>					
<i>Mark and attach appropriate documents relevant to this application</i>						
2.5.1	copy of the latest register of directors approved in terms of the companies Act, 2008 (Act No 71 of 2008)					
2.5.2	copy of the latest amended founding statement of the close corporation, approved by the Registrar of Close Corporations.					
CA-47A3		30 August 2023		Page 2 of 3		

2.5.3	certified copy of the latest appropriate letter of appointed as trustee issued by the Master of the High Court.		
2.5.4	certified copy of the latest partnership agreement.		
2.5.5	any of the following certified documents: SA Identity document, SA passport, valid SA drivers' licence, as authorised on page 3 of the resolution.		
2.5.6	copy of last certificate of registration		
2.5.7	Prescribed fee as stipulated in Part 187		
<b>3.</b>	<b>RESOLUTION</b>		
<b>RESOLUTION OF THE</b>			
<i>(DIRECTORS / MEMBERS / TRUSTEES / PARTNERS (OTHER - specify)</i>			
<b>OF</b>			
<i>(NAME OF COMPANY / CLOSE CORPORATION / TRUST / PARTNERSHIP/OTHER- specify</i>			
	<i>(PLACE)</i>	<b>ON</b>	<i>(DATE)</i>
<b>RESOLVED:</b>			
3.1	That		applies for
<i>(Name of company / close corporation / trust / partnership/ other organisation)</i>			
3.2	issue of the replacement of the Certificate of Registration Number		
3.3	That		
<i>(Full Name of Director / Member / Trustee / Partner/ Person - State Capacity)</i>			
	is authorised to take all the necessary steps on behalf of		
<i>(Name of company / close corporation / trust / partnership/ other organisation)</i>			
to sign the application form and to finalise the application as specified above, in execution of this resolution.			
<b>Signatures of AT LEAST THREE directors / members / trustees / partners / other-specify</b>			
<b>SIGNATURE</b>	<b>NAME IN BLOCK LETTERS</b>	<b>CAPACITY (Specify)</b>	
<b>SIGNATURE</b>	<b>NAME IN BLOCK LETTERS</b>	<b>CAPACITY (Specify)</b>	
<b>SIGNATURE</b>	<b>NAME IN BLOCK LETTERS</b>	<b>CAPACITY (Specify)</b>	