



Department:
Telephone number:
Physical address:
Postal address:

Airworthiness: Aircraft Inspection & Registration
0860 267 435
Ikhaya Lokundiza, 16 Treur Close, Waterfall Park, Bekker Street, Midrand, Gauteng
Private Bag X73, Halfway House 1685

Form Number: CA 47-R5
Email address: Registration@caa.co.za
Website: 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 OF CERTIFICATE OF REGISTRATION:
REMOTELY PILOTED AIRCRAFT**

Notes: (Please read carefully)

- Supporting documents:** In the case where the authorised signatory is different from the date of registration, updated certified documents of the company/ close corporation or trust should accompany the application.
- 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.
- The application plus all supporting documents must be submitted to the Director of Civil Aviation by emailing the documents to: registration@caa.co.za.

1.	APPLICATION FOR THE DUPLICATE OF THE CERTIFICATE OF REGISTRATION: REMOTELY PILOTED AIRCRAFT													
1.1	Full name of registered owner (Company/ CC/Trust)													
1.2	Trade name (if applicable)													
1.3	Full business/residential address					1.4	Postal address							
	Postal code						Postal code							
1.5	Telephone: office					1.6	Telephone: other							
1.7	Cellular phone					1.8	Fax number							
1.9	E-mail address													
1.10	I, the undersigned													
	<i>(Full names of the authorised individual)</i>													
	hereby apply for the duplicate of aircraft					Z		-						
1.11	Reason(s) for application													
1.12	I 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 and apply for the duplicate Certificate of Registration.													
CA 47-R5					30 August 2023					Page 1 of 2				

SIGNATURE OF APPLICANT	NAME IN BLOCK LETTERS	DATE
Capacity of signatory		
Name of company, close corporation, or trust		
Signatures of AT LEAST THREE /directors / members / trustees		
SIGNATURE	NAME OF BLOCK LETTERS	CAPACITY
SIGNATURE	NAME OF BLOCK LETTERS	CAPACITY
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