



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 4Q-06
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 CONFIRMATION OF NON-REGISTRATION
CERTIFICATE (LOCAL APPROVED MANUFACTURERS)**

Notes: (Please read carefully)

- 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.
- 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.
- Where the required information cannot be furnished in the space provided, the information must be submitted as a separate memorandum and attached hereto
- 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. PARTICULARS OF THE APPROVED LOCAL MANUFACTURER	
1.1	Full name of the applicant (company/ close corporation)
1.2	Trade name (if applicable)
1.3	Full business/residential address
1.4	Postal address
	Postal code
	Postal code
1.5	Telephone: home
1.6	Telephone: office
1.7	Cellular phone
1.8	Fax number
1.9	E-mail address
1.10	Legal status of applicant/registered owner / company / close corporation/

1.11	Registration number in the case of a company / close corporation:	
1.12	Date of registration of company / close corporation	
1.13	Full particulars in respect of each director / member.	
	Surname & Initials	Position
		Identity number
		Nationality
2.	PARTICULARS REGARDING THE AIRCRAFT (TO BE EXPORTED)	
	I, the undersigned	
	<i>full name of director / member / person authorised in the resolution on page 4 hereof to act on behalf of the applicant</i>	
	Hereby request a confirmation of non- registration for the aircraft	
	Test flight letters used	██████████ Z ██████████ - ██████████ ██████████ ██████████ ██████████
2.1	Manufacturer's name	
	Model / Type	
	Serial Number	
	Reason for request	
	Country of Export	
2.2	SUPPORTING DOCUMENTS:	
	Mark and attach appropriate documents relevant to this application	
2.2.1	copy of the statement of conformity issued by the manufacturer	
2.2.2	copy of the test flight report issued by the manufacturer	
2.2.3	copy of the latest register of directors approved in terms of the Companies Act, 2008 (Act No 71 of 2008)	
2.2.4	copy of the latest founding statement approved in terms of the Close Corporation Act, 1984 (Act 69 of 1984)	
2.2.5	any of the following certified documents: SA Identity document, SA passport, valid SA drivers licence, as authorised on the resolution.	
2.2.6	Appropriate cancellation fee as prescribed on Part 187	
2.3	I hereby declare that the above particulars contained herein as well as documentation submitted in support of the application are true and correct in every respect and apply herewith for the reservation of test flight registration letters	

SIGNATURE OF APPLICANT		NAME IN BLOCK LETTERS		DATE	
Capacity of signatory					
Name of company, close corporation, other-specify					
3		RESOLUTION			
RESOLUTION OF THE					
		<i>(DIRECTORS / MEMBERS / OTHER - specify)</i>			
OF					
		<i>(NAME OF COMPANY / CLOSE CORPORATION / OTHER -specify)</i>			
PASSED AT		<i>(PLACE)</i>		ON	<i>(DATE)</i>
					RESOLVED
3.1	That				applies for
		<i>(name of company / close corporation / other -specify)</i>			
3.2	confirmation of non- registration of aircraft				
	Mode/ Type				
	Serial Number				
3.3	Test Flight letters used		Z	-	
3.4	That				
		<i>(full name of director / member / other- specify)</i>			
	is authorised to take all the necessary steps on behalf of				
		<i>(name of company / close corporation / other- specify)</i>			
	to sign the application form and to finalise the application as specified above, in execution of this resolution.				
Signatures of AT LEAST THREE directors / members / other- specify					
SIGNATURE		NAME IN BLOCK LETTERS		CAPACITY	
SIGNATURE		NAME IN BLOCK LETTERS		CAPACITY	
SIGNATURE		NAME IN BLOCK LETTERS		CAPACITY	