

Application for the issue of or a change to a BCAR Approval in accordance with the Air Navigation Order and Sub-Section A8 of British Civil Airworthiness Requirements



Please complete this form online (preferred method) then print, sign and submit as instructed. Alternatively, print, then complete in BLOCK CAPITALS using black or dark blue ink.

Unique Corporate No. (to be completed by CAA)

Please complete **either** section 1 a) or section 1 b). For all registered Companies, please complete section 1 b) only.

1. APPLICANT DETAILS (The Applicant is the person responsible for payment of CAA charges)

a) Individual (including sole traders and partnerships)

Title: Forename: Surname:

Address:

..... Postcode:

Telephone: Fax:

E-mail:

Trading Name: (if applicable)

Website address:

In the case of a partnership, please complete details of all partners. Continued on a separate sheet

or b) A Company

Registered Company Name (in full):

Company Registration Number:

Country of Company Registration:

Registered Office Address:

..... Postcode:

Telephone: Fax:

E-mail:

Trading Name: (if applicable)

Trading Address (primary site):

..... Postcode:

Website address:

This application will be considered in respect of and, if appropriate, granted to, the company registered under the Company number provided on this form.

or c) An Unincorporated Association or other body

Name of Unincorporated Association or other body:

Address:

Country: Postcode:

Telephone: Fax:

Email: Mobile Telephone:

Website address:

Authorised Representative:

This application is to be signed by a person or persons authorised by the body named above to act on behalf of it. This should normally be a member or members of the managing committee of the association or other body. Evidence of the authorisation to act on behalf of the association or body should be provided with the application.

Title: Forename: Surname:
 Position:
 Charity Number (if applicable):

2. APPLICABILITY

This form is for the issue of or a change to a BCAR approval. Please complete each section of this form relevant to your application. Sections that do not require completion should be left blank. Please use the continuation box 7 where required.

3. NATURE OF APPLICATION (Please tick applicable boxes)

| | Initial Approval | Change of Company/ Trading Name* | Change to existing approval |
|---|--------------------------|-------------------------------------|-----------------------------|
| A8-1 (A1) Design and Production | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| A8-2 (A2) Suppliers | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| A8-3 (B1) Overhailer | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| A8-6 (B4) Test Houses | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| A8-8 (E3) Design Organisation | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| A8-9 (F1) Flight Testing | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| A8-9 (F3) Flight Testing | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| A8-9 (F4) Flight Testing | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| A8-15 (M3) Maintenance Organisation | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| A8-21 (E6) Design Organisation Approval | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| A8-21 (A6) Production Organisation Approval | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| A8-22 (E5) Qualified Entity | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| A8-23 (M1) Maintenance Organisation | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| A8-24 (M2) Maintenance Organisation | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| A8-25 (C5) CAMO | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| A8-26 (S1) Recreational Aviation Organisation | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Where applicable, please detail the scope of approval relevant to your application in Section 6.
 *Change of Company/Trading Name of the approval holder applies where the Company Number remains the same. If the Company No. changes a new approval will be required. Approvals granted to a sole trader/individual are non transferable

Please confirm that the Exposition will be supplied at the end of this application.

4. Change of Company/Trading Name

Please submit a copy of your company's Certificate of Incorporation for new approval applications and changes to company names where applicable.

CAA Approval Numbers affected by the Change of Company/Trading Name):

Existing Company/Trading Name:

New Company/Trading Name:

5. Change to Existing Approval

CAA Approval Numbers affected by the Change:

Changes sought:

Additional aircraft ratings:

Amendment to existing aircraft rating(s):

Additional privileges:

Change of site address:

Addition of site address:

New or additional site address:
..... Postcode:

Telephone: Fax:

Email: Web address:

Please use the continuation box 7 if the change affects more than one site.

6. SUMMARY OF SCOPE OF APPROVAL APPLIED FOR

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7. CONTINUATION BOX

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8. SUBMISSION INSTRUCTIONS

When you have completed this Form, please send it to:
Applications and Approvals
Aviation House
Gatwick Airport South
West Sussex
RH6 0YR
E-mail: apply@caa.co.uk

9. CHARGES

The charge(s) required as calculated in accordance with the CAA Airworthiness Scheme of Charges (published in CAA Official Record Series 5) to be paid on application are enclosed herewith.

NB: This application will not be processed until the applicable fees have been received.

Total fees included are: £

IMPORTANT NOTES:

Where the cost of the CAA investigations exceeds the application charge payable, the applicant shall pay additional charges to recover those excess costs incurred by the CAA in accordance with the Scheme of Charges.

If a Member or employee of the CAA is required to travel overseas in respect of this application you are advised to read the CAA Scheme of Charges to which this application relates and the section entitled 'Additional charge where functions are performed abroad'. All expenses incurred in pursuance of this application by virtue of travelling overseas will be payable by the applicant on demand.

In the event that this application is withdrawn by the applicant, a cancellation charge may be levied. The cancellation charge reflects the work carried out by the CAA on behalf of the applicant up to the point of cancellation. Please see the CAA Refunds Policy at www.caa.co.uk/refunds for more information. Where sufficient funds remain from the original application fee, this charge will be deducted from any refund made in respect of the application following cancellation.

10. FINANCIAL DECLARATION

I hereby declare that to the best of my knowledge the particulars entered on this application are accurate.

I enclose the charges payable on application in accordance with the Scheme of Charges (www.caa.co.uk/ors5).

I agree to pay any additional charges which may become payable in respect of this application under the Scheme of Charges.

Name of Applicant:
(as shown in 1 a) or 1 b))

Signature of Applicant (named in 1 a or 1b)):

Date:

FALSE REPRESENTATION STATEMENT

It is an offence to make, with intent to deceive, any false representation for the purpose of procuring the grant, issue, renewal or variation of any certificate, licence, approval, permission or other document. Persons doing so render themselves liable, on summary conviction, to a fine not exceeding the statutory maximum (currently £5000, or in Northern Ireland £2000) and on conviction on indictment to an unlimited fine or imprisonment for a term not exceeding two years or both.

| CAA USE ONLY | Applicant's name | Date of application |
|---|------------------------|-----------------------------|
| Department: | Contact Name: | |
| Job No: | Folio No: | CAA Account Number: |
| Nominal Code: | Cost Centre: | Date received: |
| If payment is received by cheque, attach a copy to this application form. | | |
| The sum of £ | | has been received by: |
| | | Date: |
| Amount paid by: | Cheque | Cash |
| | Card | Electronic Transfer* |
| £ | £ | £ |
| * Receipt of Electronic Transfer to be verified by Treasury. | | |
| Cheque drawn against account of: | | |
| Bank Account No: | Sort Code: | |

1. PAYMENT DETAILS

a) Payment type (please tick your chosen method of payment).

| | | | | | |
|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| Visa (max. £2000) | Mastercard | Debit Card | Cheque/Banker's Draft | Electronic Transfer | Cash (max. £200) |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

We do not accept American Express, Diners Club or JCB cards. Please do not send cash by post.

b) Bank Details (for payment by Cheque/Banker's Draft)

Cheques or Postal Orders should be made payable to '**Civil Aviation Authority**'.
Please write the CAA Application Form No. on the reverse of your cheque.

Please note that any refund applicable will be paid directly to the bank account stated below by BACS transfer.

Name in which Bank Account held:

Account Number: Sort Code:

If overseas: IBAN Number: Swift Code:

c) CAA Bank Account Details (if paying by Electronic Transfer)

National Westminster Bank plc
Bloomsbury Parr's Branch
PO Box 158
214 High Holborn
London
WC1V 7BX

Account Name: Civil Aviation Authority
Account Number: 36029769
Sort Code: 60-30-06
Swift Code: NWBK GB 2L
IBAN: GB90 NWBK 6030 0636 0297 69

Please supply the following information:

Amount: £ BACS/CHAPS Reference*:

* When making an electronic transfer please instruct your bankers to quote the CAA Application Form number followed by the application date in the description field (i.e. SRG 1741ddmmyyyy).

Payer: Date of Transfer:

d) For payment by Credit/Debit Card

If you wish to pay by card then please call 0330 022 1908 to make payment over the phone or e-mail

apply@caa.co.uk and request an encrypted e-mail to be sent to your advised e-mail address, which will request card details.

Please do not sent card details in a standard e-mail.