

# Nominated Postholders for an AOC Company (CAA Form 4)



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)

## 1. Details of Management Personnel required to be accepted as specified in:

Please tick appropriate box

**EU-OPS 1.185(a)(5)**   
**(Aeroplanes)**

**JAR-OPS 3.185(a)(5)**   
**(Helicopters)**

**CAP 611, Chapter 2, paragraph 5.7.3**   
**(Balloons)**

1. Operator Name: .....

2. AOC Number: .....

3. Name: .....

4. Position: .....

## 2. Qualifications relevant to Position (stated above):

**3. Work Experience relevant to Position (stated in Section 1)**

**4. Return Addresses**

On completion, please send this form under confidential cover to:

- The appropriate CAA Regional Manager (Operations) or Deputy at your assigned Regional Office (for Aeroplanes and Helicopters). Regional Office addresses are available at [www.caa.co.uk/contacts](http://www.caa.co.uk/contacts); or
- Flight Operations Inspectorate (General Aviation)  
Safety Regulation Group  
Aviation House, 1W  
Gatwick Airport South  
West Sussex  
RH6 0YR  
(for Balloons)

**5. Declaration**

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

Signature: ..... Date: .....

**CAA use only**

Name and signature of authorised CAA staff member accepting this nomination:

Signature: ..... Date: .....

Name: ..... Office: .....

*Once accepted, a copy of the completed CAA Form 4 must be returned to the nominee.*