

**Civil Aviation Authority - DGCAR** 

	RENEWAL		HANGE OF APPROVAL				
Registered Company Name:							
Address of Applicant:							
Trading Name (if different):							
Addresses Requiring Approval:							
Tel No: Fax No:		Email:					
Name of Accountable Manager:		Position:					
Scope of CAR-147 Approval Relevant to This Initial */ Renewal*/ Change of * Application							
Basic Training:							
Type Training:							
Does the organisation hold approval	under  Part-21	□Part-145	□Part-M				

APPROVAL BEING APPLIED FOR									
BASIC TRAINING		LIMITATIONS (Please tick Category applied for)							
Technician- Mechanical (B1)	TB 1.1	Aeroplanes Turbine							
	TB 1.2	Aeroplanes Piston							
	TB 1.3	Helicopter Turbine							
	TB 1.4	Helicopter Piston							
Technician- Avionic (B2)	TB2	Avionics	_						
Mechanic (A)	TA.1	Aeroplanes Turbine							
	TA.2	Aeroplanes Piston							
	TA.3	Helicopter Turbine	_						
	TA.4	Helicopter Piston							
TYPE TRAINING		LIMITATIONS ( Quote Aircraft Types required)							
Category B1	T1								
Technician - Mechanical									
Category B2	T2								
Technician- Avionic									
Category A	Т3								
Category C Base Engineer	T4								
DECLARATION OF ACCOUNTABLE MANAGER (*Delete as appropriate)									
I declare that the information provided on this form are correct.									
Signature of Accountable Manager: Date:									
Please send this form with required fee to be paid to Flight Safety Department.									