

	APPLICATION FOR CAR 145/CAR M SUBPART F APPROVAL	Form	AWR 030
		Edition	Original
	Civil Aviation Authority - DG CAR	Revision	9
		Date	10/10/2023

A. Organization's Details	
1. Name of Organization:	
2. Address(es) for which approval is sought/held:	
(a) Physical Address(es):	
(b) Postal Address(es):	
3. Country & city:	
4. General email:	
B. Contact person detail	
5.Name:	6.Position:
7.Email:	8.Tel:
C. Chief Executive/Accountable Manager	
9.Name:	10.Email:
D. Identification of Activity	
11. Application for:	<input type="checkbox"/> CAR 145 Application <input type="checkbox"/> CAR M Subpart F Application
12. Application Type:	<input type="checkbox"/> Initial <input type="checkbox"/> Renewal <input type="checkbox"/> Extension <input type="checkbox"/> Change <input type="checkbox"/> Deletion
13. Extension Required	<input type="checkbox"/> Addition class/rating/limitation <input type="checkbox"/> Addition of line stations <input type="checkbox"/> Addition of base maintenance
14. Change Required	<input type="checkbox"/> Location change <input type="checkbox"/> Ownership change <input type="checkbox"/> Organization name change <input type="checkbox"/> Personnel change (use AWR032/Form 4 for NPH)
15. Deletion Required	<input type="checkbox"/> Class deletion <input type="checkbox"/> Rating deletion <input type="checkbox"/> Limitation deletion <input type="checkbox"/> Line station deletion <input type="checkbox"/> Base maintenance deletion
E. Approvals & Manuals	
16. Local Authority CAA 145/Part M Subpart F Approval No.:	
17. Is your company EASA 145/EASA Part M Subpart F approved? <input type="checkbox"/> Yes <input type="checkbox"/> No	
If yes, Approval No.:	
18. Current Oman CAA CAR 145/CAR M Subpart F Approval No.:	
19. Expiry Date:	
20. Exposition Rev No.:	21. Date of Revision:

F. Base Maintenance				
Class	Rating (A1, A2, A3, A4)	Limitation (Type of aircraft with fitted engine)	Location	Omani Operator(s)
Aircraft				
Class	Rating	Limitation	Location/Station	Omani Operator(s)
Engines	B1 Turbine Specify:			
	B2 Piston Specify:			
	B3 APU Specify:			
Class	Rating	Limitation (List aircraft type or aircraft manufacture or component manufacture or the particular component and or cross refer to a capability list in the exposition)		
Component Other Than Complete Engines or APUs	C1 Air Cond.& Press.	<input type="checkbox"/>		
	C2 Auto Flight	<input type="checkbox"/>		
	C3 Comms.& Nav.	<input type="checkbox"/>		
	C4 Doors - Hatches	<input type="checkbox"/>		
	C5 Electrical Power	<input type="checkbox"/>		
	C6 Equipment	<input type="checkbox"/>		
	C7 Engine - APU	<input type="checkbox"/>		
	C8 Flight Controls	<input type="checkbox"/>		
	C9 Fuel Airframe	<input type="checkbox"/>		
	C10 Helicopter- Rotor	<input type="checkbox"/>		
	C11 Helicopter- Trans	<input type="checkbox"/>		
	C12 Hydraulics	<input type="checkbox"/>		
	C13 Instruments	<input type="checkbox"/>		
	C14 Landing Gear	<input type="checkbox"/>		
	C15 Oxygen	<input type="checkbox"/>		
	C16 Propellers	<input type="checkbox"/>		
	C17 Pneumatic	<input type="checkbox"/>		
	C18 Protection Ice/rain/fire	<input type="checkbox"/>		
	C19 Windows	<input type="checkbox"/>		
	C20 Structural	<input type="checkbox"/>		
	C21 Water Ballast	<input type="checkbox"/>		
	C22 Propulsion	<input type="checkbox"/>		

Class	Rating	Limitation (Quote particular NDT Method)
Specialized Services	D1 Non-Destructive Testing	<input type="checkbox"/> Eddy Current Inspection
		<input type="checkbox"/> Liquid Penetrant Inspection
		<input type="checkbox"/> Magnetic Particle Inspection
		<input type="checkbox"/> Radiography Inspection
		<input type="checkbox"/> Shearography Inspection
		<input type="checkbox"/> Thermography Inspection
		<input type="checkbox"/> Ultrasonic Inspection
		D2 Others

F. Line Maintenance

Class	Rating (A1, A2,A3, A4)	Limitation (Type of aircraft with fitted engine)	Location	Omani Operator(s)
Aircraft				

G. Declaration

I hereby certify that I have been authorized by the organization identified in item (1) to make this application and that statements and attachment here to are true and correct to the best of my knowledge.

Full Name Date:

Signature :..... Stamp:

H. CAA Application Requirements

1 <input type="checkbox"/>	Maintenance Agreement with Omani Operator
2 <input type="checkbox"/>	Letter of Intent of Omani Operator
3 <input type="checkbox"/>	Biographical details of nominated persons using CAA Form AWR032 (for initial or if change)
4 <input type="checkbox"/>	Omani organizations are required to submit their Company Exposition manual for CAA approval.
5 <input type="checkbox"/>	Foreign Organizations to submit their National Maintenance Organization Approval /or EASA approval.
6 <input type="checkbox"/>	Foreign Organizations are required to submit their exposition manual.
7 <input type="checkbox"/>	Foreign Organizations to submit CAA MOE-Supplement (If required by CAA).
8 <input type="checkbox"/>	CAA should audit your facility prior to grant 145 approval for which prior notice shall be served.
9 <input type="checkbox"/>	Find applicable fees in CAN 1-06
10 <input type="checkbox"/>	Use this link for the Law, regulations and application forms. https://www.caa.gov.om/