



Application for Rectification Interval Extension (R.I.E)

Form	AWR OPS 047
Revision	04
Date	01 Feb 2026

PART 1 – MEL Defect

1. Name of Operator		2. Date of Defect	
3. Aircraft Registration		4. Aircraft Type	
5. Tech Log / Defect Reference No:		6. Date MEL Applied:	
		7. MEL Reference No:	
8. Original Rectification Due Date:		9. Operational Impact: RVSM, ETOPS, LOW VIS etc.	
10. Detail of Defect		11. Previous Extension Granted: (If Yes)	<input type="checkbox"/> YES <input type="checkbox"/> NO
			Reference No. & Date
			No: Date:
12. Rectification Interval Category		13. Expiry Date of Rectification Interval	
14. Reason for not Rectifying <i>(tick all that are applicable)</i>	<input type="checkbox"/> Parts unavailability <input type="checkbox"/> Special tooling / equipment unavailability <input type="checkbox"/> Maintenance access / location constraint <input type="checkbox"/> Other (specify):		
15. Detailed Justification (mandatory): <i>(Include P/N, supplier status, confirmed delivery dates, maintenance planning constraints)</i>			
16. Supporting evidences <i>(tick all that are applicable)</i>	<input type="checkbox"/> Purchase Order / AOG request <input type="checkbox"/> OEM NTO (if required) <input type="checkbox"/> Supplier or OEM correspondence <input type="checkbox"/> Maintenance planning extract <input type="checkbox"/> Other (specify):		

Part 2 – Declaration of R.I.E.

17. Requested Extension Period	From Date:		To Date:	
	Total Extension Duration (Days)			
	Target Rectification Date:			
18. Declarations	The applicant hereby declares that: a. The aircraft will be actively monitored during the extension period			



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b. Rectification will be carried out at the earliest feasible opportunity
c. No open findings, deferred defects, or combined MEL conditions exist that would compound the risk of continued operation
d. All information provided in this application is complete and accurate.

19. CAMO MANAGER

Name			
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Signature		Date	
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20. FLIGHT OPERATIONS MANAGER

Name			
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Signature		Date	
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Part 3 – AUTHORIZATION – CAA USE ONLY

21. R.I.E. Authorization No.			
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22. Duration of R.I.E. Authorized (Days)		23. Due Date	
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24. AWI Comments			
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25. Authorizing AWI			
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Name	Signature	Date	

26. FOI Comments			
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27. Authorizing FOI			
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Name	Signature	Date	