Application for Exemption



				CÏV	IL AVIATION AUTHORITY	
	F	Part A1 – App	olication for Exemption	n		
(A1-1) Details of Applicant						
Applicant's Name						
(Organization / Person)						
Applicant's Address						
7 (p p 110 a 110					4	
Certificate/Approval/Licer	ıse,	Reference/Nur	mber	Expiry Date (dd-r	mmm-yyyy)	
etc. details:	•					
(A1-2) Particulars of Rec	uest	ted Exemption				
	-		applicable regulations, rule	s. implementing s	tandards or	
directive from which exem	•		•			
Reference to Requirements			Text or Details of relevant	Requirements		
4						
			utical product, or type of ai e or kind of service to be af		•	
		·		· · ·	•	
(A1-4) If the exemption wi	ill aff	ect a particular l	kind of operation, provide o	details of such ope	eration.	
		X /				
	- 4					
(A1-5) Indicate which other	er par	ties may be affe	ected by granting exemption	n		
Airlines			Maintenance Orga	nizations		
Air Crew			Ground Operatio	ns/staff		
Air Navigation Services		<u> </u>	Training Organizations	or Simulators		
Aerodromes			Rescue and Fire F	ighting		
Security General Public						
Others? Specify:						
(A1-6) The reasons why the exemption is necessary						
*	¥					
(A1-7) Associated implication if such exemption is not granted						
(AZ-7) Associated implicat	.011 11	Jacii exemption	in is not granted			
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Application for Exemption

Part A2 – Details of Applicant's Safety Measures							
(A2-1) Safety risk assessment, analysis or aeronautical study (as applicable) performed?							
(if yes, briefly list in the below; full details to be attached to this application)							
Description of Hazards	Description of Conse	equence	Safety	/ Risk	Tolerabi	lity Level	
		•		or Index		.,	
(A2-2) Mitigation Measures to a as desired by the relevan			equival	ent level o	of safety	YES	
(if yes, briefly list in the bo			pplicat	ion)		\bigcirc NO	
Mitigation Measures		Post Mitigation			igation To	lerability	
		Level or Index		Level			
	. (
(A2-3) List the details of Public	Interest Factors Consi	dered					
	(if not exists	indicate NIL)					
	.,	,					
(A2-4) Is the Applicant aware o	f any information on a	elevant accident	s or inc	idents rela	ated to sir	milar	
conditions either due to			. J u				
If (YES), provide details of Accident/Incident / (NO) state "NIL"							
., (123),	J. O Trac actano of Meen	active includency (N	J, 31411	J			

Application for Exemption



	Part A3 – Declaration by the Applicant					
-	ne applicant seek to operate under the post sairspace?	roposed e	exemption outside of	○ YES ○ NO		
	If (yes) indicate whether the exemption would contravene any provision of the standards and recommended practices of the International Civil Aviation Organization (ICAO), otherwise (NO) indicate "NIL".					
				N		
(A3-2) Type	of Processing request (Normal/Emerg	ency pro	ocessing)			
-	rocessing:					
•	olication shall be submitted in a timely mann ified by the "Exemption Procedure Manual (E					
b) Emergenc	y processing:					
why the	an applicant seeks emergency processing, the application was not filed in a timely manner,	and the re	easons it is an emergency.			
manne				apply in a timely		
	essing is requested: Normal Pro	-				
(read above r	ootes) (Emergency	processir	ng (justification attached).			
(A3-3) Durat	tion of Exemption					
	Start Date (dd-mmm-yyyy) End Date (ddd-mmm-yyyy)					
		Ť				
	icant Requesting Exemption untable Manager / CEO / Nominated Post Ho	lder as ap	plicable on behalf of an Organi	zation)		
Full Name		Title				
Email		Phone				
The applicant (as detailed above) hereby declares that the information provided in this application is correct and that no relevant information has been withheld. Signature:						
Date of application(ddd-mmm-yyyy):						
LIST OF ATTACHED DOCUMENTS: (indicate Nil in case of no attachment)						

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(for CAA use only)

Part B1 – Evaluation and recommendation of Exemption

1)	Department responsible for Evaluating Exemption	
(B1.	Inspector Responsible	
	Email of Inspector	

	(B1-2) Checklist and evaluation of Exemption Package	Ass	sessment	
1	Has the applicant clearly specified the details of the exemption sought?	SAT.	N/SAT.	N/A
2	Do the details include the reasons why the exemption is sought?	SAT.	N/SAT.	N/A
3	Do the details include the duration of the exemption?	SAT.	N/SAT.	N/A
4	Has the applicant clearly indicated the factors considered in making the request?	SAT.	N/SAT.	N/A
5	Do the public interest and safety factors considered, as applicable?	SAT.	N/SAT.	N/A
6	Has the applicant's proposed means to comply with the relevant regulation including mitigation measures to ensure safety is not compromised?	SAT.	N/SAT.	N/A
7	Has the applicant submitted all relevant documents to support the application?	SAT.	N/SAT.	N/A
8	If certified, has the applicant provided the details of the certificate in force?	SAT.	N/SAT.	N/A
9	Is the application for exemption submitted as part of an application of a certificate/approval?	SAT.	N/SAT.	N/A
10	Are there any known safety concerns that are yet to be addressed by the applicant?	SAT.	N/SAT.	N/A
11	Has the applicant conducted and submitted a safety risk assessment for all the identified safety implications?	SAT.	N/SAT.	N/A

(B1-3) Legal Considerations	If applicable specify the relevant information, otherwise indicate "NIL"
If granted, will this exemption infringe on any other DGCAR regulatory requirements?	
If granted, will this exemption infringe on the provisions of any other laws of the Sultanate of Oman?	
Are there any other legal implications relative to this application?	

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Description of Hazards Co		Conseque	equence Conditions/Mitigation Measures for Exemption							
-										
					•					
(B1-5) RISK ASSESSMENT A	After Condition	s/Mitigati	on Imposed		(B1-7) Inspector Re	commenda	ation for Gr	ranting Exe	mption	
	Probabil	<u> </u>	Severity					<u> </u>	•	
Risk Assessment		-	-							
(Post Mitigation)										
(B1-6) Terms, Conditions a	nd Limitation		,							
The CAA will in the interests		Safety im	pose or specify te	erms.						
conditions and limitation to be		•								
the specified requirements: St	tate such Terms,	conditions	and Limitations be	elow:	Evaluated by:					
				 	Data: (dd mmm yana)					
					Date: (dd-mmm-yyyy)					
				Risk Assessment			Risk Severity			
					Matrix (See CAR-100	Α	В	C	D	E
					Appendix 3)	Catastrophic	Hazardous	Major	Minor	Negligible
					5 – Frequent	5A	5B	5C	5D	5E
			7	1.1	=		4.5	4.0		

Matrix (See CAR-100 Appendix 3)		Misk Severity						
		A Catastrophic	B Hazardous	C Major	D Minor	E Negligible		
>	5 – Frequent	5A	5B	5C	5D	5E		
Probability	4 – Occasional	4A	4B	4C	4D	4E		
obal	3 – Remote	3A	3B	3C	3D	3E		
	2 – Improbable	2A	2 B	2C	2D	2E		
Risk	1 – Extremely Improbable	1A	1B	1C	1D	1E		

Revision 03 01 November 2025

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Part B2 – D	ecision on Granting of Exemption
(B2-1) Department Director Review	and Recommendation for Granting Exemption
Evaluation	Indicate the Evaluation outcomes
Has the risk assessment been done using appropriate risk management tools?	
Is the risk assessment done by the applicant adequate for all the risks identified for this exemption application?	
Are the Applicant's proposed means - including their mitigations -, appropriately upholds the desired level of safety of the relevant Requirements?	
Recommendation for Granting or Denial of the Exemption	
Department Director Signature:	
Date:	
(B2-2) DIRECTOR GENERAL of CIVIL APPROVAL/REJECTION	AVIATION REGUALTIONS - EXEMPTION
Exemption Status (Granted or Denied):	
(if) Granted, From Date: (dd-mmm-yyyy)	
(if) Granted to Date: (Final/Expiry)	
Exemption Instrument to be Published:	
DGCAR Name	
DGCAR Signature	