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|  | **CIVIL AVIATION AUTHORITY OF MALAYSIA** | | |
| **Application for Approved Training Organisation – Remote Pilot Training Organisation** | | | |
| **APPLICATION FOR** | | RPTO COA  TRAINING SPECIFICATIONS | INITIAL |
| RENEWAL |
| AMENDMENT |

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| **Part I – Particulars of Applicant** *(This person will be the main point of contact for CAAM)* | | | | | | | | | | | | | | | | | | |
| Title: | | | Name of Applicant: | | | | | | | | | | | | | | Tel: | |
| Designation: | | | | | | | | | | | | Email: | | | | | | |
| **Part II – Particulars of Organisation** | | | | | | | | | | | | | | | | | | |
| Name of Organisation: | | | | | | | | | | | | | | | | | | |
| Address of Place of Business: | | | | | | | | | | | | | | | | | | |
| Principal Base of Training Name and Address: | | | | | | | | | | | | | | | | | | |
| Base aerodrome (if applicable): | | | | | | | | | | | | | | | | | | |
| Tel: | | | | | | | | | | | Fax: | | | | | | | |
| E-mail: | | | | | | | | | | | | | | | | | | |
| Operational Point of Contact:  Tel: (60)  Fax: (60)  Email: | | | | | | | | | | | | | | | | | | |
| **Part III – Particulars of COA RPTO Nominated Post Holder** | | | | | | | | | | | | | | | | | | |
| **Personnel** | | | | | | **Name & Designation** | | | | | | | | **Contact Number & Email Address** | | | | |
| Accountable Manager (AM): | | | | | |  | | | | | | | |  | | | | |
| Safety Manager (SM): | | | | | |  | | | | | | | |  | | | | |
| Chief Remote Pilot (CRP): | | | | | |  | | | | | | | |  | | | | |
| Maintenance Controller (MC): | | | | | |  | | | | | | | |  | | | | |
| **Part IV- List of Instructing Personnel** | | | | | | | | | | | | | | | | | | |
| **Remote Pilot Flight Instructor(s) (RFI):** | | | | | | | | | | **Remote Pilot Ground Instructor(s) (RGI):** | | | | | | | | |
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| **Authorised Examiner** | | | | | | | | | | **Flight Instructor Examiner** | | | | | | | | |
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| **Part V – Particulars of Unmanned Aircraft for Operations** | | | | | | | | | | | | | | | | | | |
| **Manufacturer** | | **Model** | | | **Type of activity** | | | | **Total Number of UA operated** | | | | **MTOM** | | | **Serial Number** | | **FSTD** |
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| **Proposed date for the commencement of operations:** | | | | | | | | | |  | | | | | | | | |
| **Organisation Structure (initial RPTO COA / Change organization):** | | | | | | | | | | Please attach a description of the applicant’s business organisation/structure and names and contact numbers of those entities and individuals having a major financial interest (share holder) | | | | | | | | |
| **Financial Data** | | | | | | | | | | Please attach sufficient financial data to support financial viability of your proposal and to ensure there are adequate funds for a specified period after commencement of the operation. | | | | | | | | |
| **Comment\*: RPTO/Training Specifications change (brief of changes or in cover letter to amplify the detail)** | | | | | | | | | | | | | | | | | | |
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| **Part VI - RPTO proposed types of training** | | | | | | | | | | | | | | | | | | |
| A2 RCoC (only applicable when CAD is effective) | | | | | | | RCoC-B | | | | | | | | Safety Management System (SMS) for UAS Operations | | | |
|  | | | | | | | Module 1 (EVLOS) | | | | | | | | Specific Operations Risk Assessment Course (SORA | | | |
|  | | | | | | | Module 2 (AGR) | | | | | | | | Train the Trainer Course | | | |
|  | | | | | | |  | | | | | | | | Crew Resource Management (CRM) | | | |
| **CHECKLIST** | | | | | | | | | | | | | | | | | | |
| **No** | **Items** | | | **Tick (X) as applicable** | | | | **Remarks** | | | | | | | | | | |
| **4.1** | **Application Form** | | |  | | | |  | | | | | | | | | | |
| **4.2** | **Schedule of Events (initial)** | | |  | | | |  | | | | | | | | | | |
| **4.2** | **Compliance Checklist** | | |  | | | |  | | | | | | | | | | |
| **4.3** | **Cheque Attached for COA RPTO application fee** | | |  | | | | The fee payable for this purpose is prescribed in Civil Aviation (Fees and Charges) Regulation 2016. Crossed cheque payment must be payable to “Civil Aviation Authority of Malaysia. | | | | | | | | | | |
| **4.4** | **Location(s) of proposed operation(s)** | | |  | | | | Submitted to [drone.rpto@caam.gov.my](mailto:drone.rpto@caam.gov.my) in .kmz/.kml file. If no changes to the one given in POPS, include statement in this remarks column, “NO CHANGES TO POPS” | | | | | | | | | | |

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| **Part VII – Applicant Declaration** |
| **I, the undersigned, hereby declare that:**   * **The information provided in this application form is true and correct.** * **That the information provided in this application will allow CAAM to calculate an estimate for service for processing this application.** * **That the cost estimate may change, and processing the application may be delayed, if:**   + **The application does not accurately and completely identify my requirements; or**   + **The details in this application are subsequently changed; or**   + **Adequate supporting documentation has not been provided.** * **For the CAAM to proceed with this application, I must:**   + **Accept the cost estimate; and**   + **Forward the prescribed payment; and**   + **Forward all supporting documentations to the CAAM.**   **I, the undersigned, hereby declared that the UAS operation will comply with:**   * **Any applicable UAS Regulations related to privacy, data protection, liability, insurance, security and environmental protection; and** * **The applicable requirements of MCAR and its legislation pertaining UAS; and** * **The limitations and conditions defined in the Remote Pilot Training Organisation Certificate of Approval, its terms and conditions and training specifications provided by the CAAM.**     Name, Signature of Accountable Manager & Company Stamp Date (Day / Month / Year) |

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| **CAAM USE** | |
| REMARKS: | |
| Signature: | Date: |
| Accepted by UASI: | |
| Signature: | Date: |
| Director of Flight Operations: | |

**FOR CAAM USE ONLY**

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| --- | --- |
| Application Fee: |  |
| Receipt No: |  |
| Cheque / P.O: |  |
| Initial: |  |
| Date: |  |

UASI Name

ACCEPT REJECT

Remarks

UASI Signature

Date

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|  | * Personnel duties and responsibilities |  |  |  |  |