

## Notes to applicant

### General

1. Please ensure form is correctly filled; the applicable fee is fully paid and that all required supporting documentation is provided. Incomplete/incorrect form or/and inadequate payment will lead to delays in processing your application.
2. Applications shall be submitted as early as possible before the planned commencement date of operation. The entire certification process usually takes 9 months, subject to compliance by the applicant and taking into consideration the time required for the entire certification process and its complexity. Where space is insufficient for the information required, the words "See Attachment 1,2,3" etc should be written and the necessary attachments supplied with the application form.
3. Completed form and supporting documents are to be submitted with the AOC application fee (non-refundable) to one of the following addresses:

<b>Mailing address</b>	<b>Office address (for hand delivery)</b>
Director, Flight Operations Division Civil Aviation Authority of Malaysia 27 Persiaran Perdana Level 2 Podium Block, Precinct 4 62618 Putrajaya, Malaysia.	Civil Aviation Authority of Malaysia Pihak Berkuasa Penerbangan Awam Malaysia No. 27 Persiaran Perdana Aras 1-4 Blok Podium 62618 Putrajaya Malaysia

### Payment

4. The fee payable for this purpose is prescribed in Civil Aviation (Fees and Charges) Regulations 2016.
5. Payment for this application can be made via cheque.
6. Crossed cheque payment must be made payable to "Civil Aviation Authority of Malaysia".

### Collection

7. You will be notified when the certificate is ready for collection at the Flight Operations Division office.

#### **NOTE 1**

Operator principal place of business telephone and fax details, including the country code. E-mail to be provided if available.

#### **NOTE 2**

Contact details, at which operational management can be contacted without undue delay.

#### **NOTE 3**

The particulars given should be those of the person who will be the operator of the aircraft, in the case of an incorporated body, the body, the names, addresses and nationality of the Directors, and the Chief Executive Officer (or Managing Director of General Manager), and in the case of an unincorporated corporation, the names, addresses and nationality of all partners. This list should reflect the organisational structure of the company applying for the AOC and the financial data and business plan.

#### **NOTE 4**

Give the manufacture and model of aircraft (for which a Certificate is required) to be operated (e.g. Cessna 152, Diamond 42) and the number of each type and state of registry and registration marks, owned or immediately available for operation by the applicant. If aircraft are not currently available, give the date on which they will be.

#### **NOTE 5**

This relates to the normal operating bases for each type of aircraft used by the applicant.

#### **NOTE 6**

If more than one type of aircraft is to be operated, give the starting dates proposed for each type.

#### **NOTE 7**

A separate list of routes (including alternate routes) should be provided for each type of aircraft. Please name each aerodrome to be used on each route, including technical stops and alternate aerodromes for the purpose of training.

**NOTE 8**

Give details of the address, location and size of accommodation to be used by operating staff (including administrative and support staff) and students. Please state whether the accommodation is to be used solely by the applicant's staff and students or otherwise.

**NOTE 9**

The minimum time between receipt of completed manuals and the proposed date for the commencement of operations is 9 months. If manuals are not submitted with the application, please give date(s) when they will be presented for inspection. Applicants shall ensure that the validity of the manuals submitted to CAAM is maintained at all times.

**NOTE 10**

If the routine ground handling and maintenance of the applicant's aircraft is carried out by a number of contractors or service providers, please list them all and give details of the work for which each is responsible. CAAM will advise the applicant if further information is required. Reference to the Malaysia Airworthiness Requirements should be made. Details of leasing contracts should be attached.

**NOTE 11**

Please list the names, qualifications and experience of the persons (e.g. Designated Flight Examiner, Flight Instructor, etc) responsible for testing:

- (a) Flight Instructors
- (b) Assistant Flight Instructors
- (c) Student pilots
- (d) Engineers, if any


The persons named should be those authorised by the applicant/CAAM to sign on its behalf. Records are to be maintained under the relevant provisions of the MCAIR 2016.

**NOTE 12**

1. The information provided under this heading should give a clear picture of the chain of responsibility for all major aspects of management and of the arrangements for suitably qualified deputies to assume the functions of Senior Executive temporarily absent from duty. In particular, the persons responsible for the following duties should be named:

- a The issue and amendment of operations and training manuals, and other instructions to members of operating crew;
- b Management of the operations department;
- c Controlling the rostering of crew for flying duty;
- d General supervision of flight operations;
- e Ensuring the crew and ground personnel training and periodic tests are carried out as necessary;
- f The discipline and general supervision of each grade of flying staff;
- g Control and general supervision of the traffic or other department responsible at the main operating base(s) for compiling ship papers (including loadsheets) and for the loading aircraft;
- h Co-ordinating any necessary action arising from Commanders' voyage reports;
- i Making arrangements for the service of handling agents.

**Note:** Provided all the necessary information is given, it can be presented in the form best suited to the applicant's organisation and general circumstances.

 <b>CIVIL AVIATION AUTHORITY OF MALAYSIA</b> <b>PROSPECTIVE OPERATOR'S PRE-ASSESSMENT STATEMENT FORM (POPS)</b>				
<b>Part I – Particulars of Applicant</b> <i>(This person will be the main point of contact for CAAM)</i>				
Title:	Name of Applicant:			Tel:
Designation:			Email:	
<b>Part II – Particulars of Organisation</b>				
Name of Organisation:				
Address of main base of operations:				
Name(s) if different from above in which operations will be conducted:				
Tel ( <b>See Note 1</b> ):			Fax ( <b>See Note 1</b> ):	
E-mail ( <b>See Note 1</b> ):				
Operational Point of Contact ( <b>See Note 2</b> ):				
Tel: (60)				
Fax: (60)				
Email:				
<b>Part III – Particulars of Directors/Share Holders (See Note 3)</b>				
Designation	Name	Address	Telephone	Nationality
<b>Part IV – Particulars of ATO Post Holders</b>				
Personnel	Name & Designation		Contact Number & Email Address	
Accountable Manager:				
Head of Training:				

Chief Flight Instructor/Chief Flight Simulator Instructor:			
Chief Ground Instructor:			
Safety Manager:			
Continuing Airworthiness Manager or equivalent:			
Quality Manager:			
<b>Part V – Particulars of Aircraft for Operations (for ATO utilising aircraft) (See Note 4)</b>			
Aircraft Type	No. of Aircraft	State of Registry	Registration Marks
Aerodromes at which each type of aircraft will be based ( <b>See Note 5</b> ):			
Proposed date for the commencement of operations ( <b>See Note 6</b> ):			
Routes on which training are expected to be conducted with each type of aircraft. Specify all aerodromes to be used on each route, including alternates ( <b>See Note 7</b> ):			
Aircraft Type	Routing		

<b>Part VI – Particulars of FSTD for training (for ATO utilising FSTD)</b>		
FSTD details:		
Number of FSTD, type and model:		
<b>Part VII – Details of The Arrangements to Support the Proposed Operations</b>		
Details of office accommodation available for use by operating staff ( <b>See Note 8</b> ):		
Name(s) and address(es) of organisation(s) responsible for all ground handling and maintenance of each type of aircraft ( <b>See Note 10</b> ):		
<b>Part VIII – Particulars of Examiners (If applicable)</b>		
Names, qualifications and experience of the persons responsible for qualification and testing ( <b>see Note 11</b> ):		
<b>Part IX – Types of Training Proposed At the ATO</b>		
List the types of training proposed (e.g. PPL (A)/(H) Course, MPL Course, Initial Type Rating Course, Flight Instructor Course, etc.):		
<b>Part X – Applicant Checklist (Please check the applicable boxes)</b>		
<b>Supporting documents to be submitted</b>	<b>Yes</b>	<b>No</b>
Cheque attached for COA application fee	<input type="checkbox"/>	<input type="checkbox"/>
Organisation Chart, financial data, and Business plan ( <b>see Note 3</b> )	<input type="checkbox"/>	<input type="checkbox"/>
Draft/final copies of operations manuals and complete CAAM Forms ( <b>see Note 9</b> )	<input type="checkbox"/>	<input type="checkbox"/>
Leasing contracts with ground services provider(s) and aircraft maintenance organisation(s) ( <b>see Note 10</b> )	<input type="checkbox"/>	<input type="checkbox"/>
Qualifications of the examiners ( <b>see Note 11</b> )	<input type="checkbox"/>	<input type="checkbox"/>
Details of the duties and responsibilities of the COA post holders declared in Part IV. Individual resumes are to be attached. ( <b>see Note 12</b> )	<input type="checkbox"/>	<input type="checkbox"/>

**Part XI – Applicant Declaration**

I hereby declare that the information given in this form is true in every respect and that I will comply with all the necessary requirements for the grant of a Certificate of Approval. I further declare that all documents submitted in support of this application are true in every respect. I hereby apply for the grant of a Certificate of Approval.

\_\_\_\_\_  
Name, Signature of Accountable Manager & Company Stamp

\_\_\_\_\_  
Date (Day / Month / Year)

**For Official Use**

Fee Payable:

Cheque No.:

Receipt No.:

Received by:

\_\_\_\_\_  
Authorised Collection Officer  
(Name Stamp & Signature)

\_\_\_\_\_  
Date  
(Day / Month / Year)

COA No.:

Period of validity:

Remarks<sup>1</sup>:

<p>Assessed by:</p>     <p style="text-align: center;">Flight Operations Inspector (Name Stamp, Date &amp; Signature)</p>	<p>Assessed by:</p>     <p style="text-align: center;">Airworthiness Inspector (Name Stamp, Date &amp; Signature)</p>
<p>Supported by:</p>     <p style="text-align: center;">Director of Flight Operations (Name Stamp, Date &amp; Signature)</p>	<p>Supported by:</p>     <p style="text-align: center;">Director of Airworthiness (Name Stamp, Date &amp; Signature)</p>

<sup>1</sup> To indicate the completion of document evaluation and validation of the applicant's ability to comply with the CAD 1011 – ATO or CAD 1002 - FC with safe operating practices. Additionally, indicate the outcome of the application – whether or not, the evaluation is satisfactory and the grant of the COA is recommended.