

CIVIL AVIATION AUTHORITY OF MALAYSIA

APPLICATION FOR FLIGHT SIMULATION TRAINING DEVICE (FSTD) USER APPROVAL CERTIFICATE (UAC)

A. APPLICANT							
Application form for: Initial Issue Ren		ewal					
Operator/ATO/Aircraft Owner Name:		Expected Commencement Date:					
Point of Contact: (Name):		Phone: Email:					
B. ATO AND FSTD DETAILS							
Application for: □Local FSTD □Foreign FSTD							
Facility name:		City, Country:					
Contact Name:		Phone: Email:					
FSTD Model/Series:	FSTD Type	e: FFS A B C D FNPT I I MCC FTD 1 2 BITD					
Aircraft Model/ series:							
Differences: * No: Yes: Flight Engine Instrument Com/Nav Equipment, Cockpit layout Others:							
C. APPROVAL SOUGHT							
FSTD lease as: UWet lease/full ATO support Dry lease (non ATO Support)							
Use for Training and Check: PPL CPL MPL ATPL SE Rating ME Rating IR Type Rating Proficiency Checks Others: Please specify (e.g. UPRT, EDTO, etc)							
D. SUPPORTING EVIDENCE & REMARK							
ATO Certificate		STD COQ					
List of differences and proposed Train Justification	ining	□ Training Syllabus					

Applicant's Remark (use separate sheet):							
Applicant's Signature:		Submission Date:					
Applicant's Name:							
Applicant's Designation:							
E. FOR CAAM OFFICIAL USE ONLY:							
Accepted by FOI:		Signature:					
Accepted Date:	Proposed Evaluation Date:						
DFO/Head of FSTD: Accepting Foreign Authority approval and documented evidence Simulator evaluation required: Y / N							
DFO/Head of FSTD Remarks:							
		-					
Signature:		Date:					
DFO/Head of FSTD:							
FOR CAAM USE ONLY							

FOI Checked			
	ACCEPT	Application Fee:	
Remarks _		Receipt No:	
		Cheque / P.O:	
FOI Signature -		 	
Date:		 Initial:	
		_	
		Date:	