



CIVIL AVIATION AUTHORITY MALAYSIA

APPLICATION FOR MAINTENANCE TRAINING ORGANISATION APPROVAL (Civil Aviation Regulations 2016)

1. APPLICATION FOR: (Please tick (√) on relevant box)		<input type="checkbox"/> INITIAL	<input type="checkbox"/> RENEWAL	<input type="checkbox"/> VARIATION
2. APPLICANTS DETAILS				
2.1 Company Name:				
2.2 Address:				
2.3 MTO Approval Number:				
2.4 NAA Approval Number:				
3. CONTACT DETAILS				
3.1 Accountable Manager:		Name		
		Job Title		
		Phone/ Fax		
		Email		
3.2 Person in charge of Quality System:		Name		
		Job Title		
		Phone/ Fax		
		Email		
4. MAINTENANCE TRAINING ORGANISATION LOCATION – other than location specified in paragraph 2.2				
4.1 Additional Location:				
5. OTHER APPROVAL				
Does the organisation hold other CAAM Approvals?			Yes <input type="checkbox"/>	No <input type="checkbox"/>
Part 145	<input type="checkbox"/>	Approval No.:		
Part M	<input type="checkbox"/>	Approval No.:		
Part 21	<input type="checkbox"/>	Approval No.:		
6. SCOPE OF APPLICATION (Please tick (√) on relevant box)				
5.1 Basic Training <input type="checkbox"/>		5.2 Type/ Task Training <input type="checkbox"/>		5.3 Additional Location <input type="checkbox"/>
6.1 Basic Training				
Rating	Scope	<input type="checkbox"/>	Rating	Scope
B1.1	Aeroplanes Turbine	<input type="checkbox"/>	A1	Aeroplanes Turbine <input type="checkbox"/>
B1.2	Aeroplanes Piston	<input type="checkbox"/>	A2	Aeroplanes Piston <input type="checkbox"/>
B1.3	Helicopters Turbine	<input type="checkbox"/>	A3	Helicopters Turbine <input type="checkbox"/>
B1.4	Helicopters Piston	<input type="checkbox"/>	A4	Helicopters Piston <input type="checkbox"/>
B2	Avionics	<input type="checkbox"/>		

6.2 Type/ Task Training			
Rating	Scope [Quote Aircraft Type and Engine]	Rating	Scope [Quote Aircraft Type and Engine]
B1/ T1		A/ T3	
B2/ T2		C/ T4	
6.3 Additional Site			
Address:			
7. MANAGEMENT AND INSTRUCTIONAL STAFF			
Position/ Post		Name	
Person responsible for Training			
Person responsible for Examination			
Practical Assessor			
Knowledge Examiner			
8. DOCUMENTS SUBMITTED (as applicable)			
Document		Document reference	
7.1 Maintenance Training Organisation Exposition			
7.2 Compliance Matrix			
7.3 Nominated Post Holder (CAAM Form 4)			
7.4 List of qualified instructional staff			
7.5 Maintenance Training Programme/ Training Need Analysis Document			
7.6 Sample of exam question			
7.7 Others; please specify			
9. APPLICANT'S DECLARATION AND ACCEPTANCE OF GENERAL CONDITIONS AND TERMS OF PAYMENTS:			
<p>I declare that the above particulars and documents submitted with this application are true in every respect.</p> <p>I have understood that I am submitting an application for which fees or charges will be levied by the CAAM in accordance with Civil Aviation (Fees and Charges) Regulations 2016.</p> <p>I declare to be aware that fees or charges, as well as all associated costs must be paid whether or not the application is successful and that they are not be refundable. Moreover, I declare that I am aware of the consequences of non-payment.</p>			
Name of Accountable Manager		Signature*	Date
<p>Note: * CAAM does not accept applications without signature. The signature of either the Accountable Manager or of the new proposed Accountable Manager is always required.</p>			
<p>False Representation Statement</p> <p>It is an offence under Regulation 164 of the Civil Aviation Regulation 2016 to make any false representation for the purpose of himself, herself or any other person the grant, issue, renewal or variation of any such authorization, direction, certificate, licence, approval, permission, permit, exemption or other documents issued or required by this regulation.</p>			

INSTRUCTION

The following information will facilitate us in completing your application. Failure to supply such information may result in your application being delayed while we endeavor to contact you.

- Field 1 For initial or variation application, please enter the scope of application intended in Field 6.
- Field 2.1 Please enter the name of the legal entity making the application and provide copy of company's registration certificate
- Field 2.2 Please enter complete registered business address.
- Field 2.3 For renewal and/ or variation application, please enter MTO Approval Number. Not applicable for initial application
- Field 2.4 Please enter Local National Aviation Authority MTO Approval Number (for foreign organisation).
- Field 3 For initial application, please enter the name of proposed Accountable Manager and person in charge of Quality System. For renewal and variation please enter the existing name of the postholder. For change of existing post holder please use CAAM Form 4.
- Field 4 For initial and renewal, please enter the address of other than main location, if applicable.
- Field 5 If applicable, please enter the organisation approval reference number issued by CAAM.
- Field 6 Indicates the scope of application intended for initial and variation application. Please tick appropriate box, and refer to relevant subparagraph to enter the detail.
- Field 6.1 Please tick appropriate box for basic training appropriate to the category/ subcategory applied for.
- Field 6.2 Please quote aircraft type training applied for, with airframe and engine combination appropriate to the category applied for. Example Airbus A330 (PW4000); Piper PA28 (Lycoming); Leonardo AW139(PW PT6C); Differences Diamond DA40(Technify) to Diamond DA40(Austro).
- Field 6.3 For variation application, please enter the address of intended additional location of training.
- Field 7 For initial application, please enter the name of proposed person in charge of Training and Examination management structure. For renewal and variation please enter the existing name of the postholder. For change of existing post holder please use CAAM Form 4. Cross reference to another documents is acceptable if there is more than one person.
- Field 8 Kindly provide relevant document to be submitted when and as required during application.
- Others Payment shall be made in accordance with Civil Aviation Regulation 2016 (Fees and Charges), latest amendment

10. FOR CAAM USE ONLY

Amount Received		Receipt No.	
Date of Payment		Signature and date	