

Aircraft Maintenance Engineer – Maintenance Approval

For the issue of a Maintenance Approval, a completed Fit and Proper Person Questionnaire, form CAA 24FPP or CAA 24FPPDEC, is required with this application. Refer to the 24FPP form for guidance on the appropriate form to be used.

1. Personal Details

NZ CAA Client / Licence Number <i>(if known)</i>				Date of Birth <i>(dd/mm/yy)</i>					
Title <i>(Mr/Mrs/Ms/Miss)</i>			Last Name						
Given Name(s)									
Country of Birth				Nationality					
Address for Service - <i>Civil Aviation Act, s8, requires applicants to provide an address for service in New Zealand (i.e. a physical address) and to promptly notify the Director of any changes.</i>									
Tel					Mob				
Fax					Email				
Postal Address <i>(if different from Address for Service)</i>									
Tel					Mob				
Fax					Email				

2. Maintenance Approval

<i>Please indicate application being</i>	Maintenance Approval Issue <input type="checkbox"/>	Maintenance Approval Renewal <input type="checkbox"/>	Maintenance Approval Amendment <input type="checkbox"/>
<i>Please give details of the maintenance to be performed. Specify fully aircraft or component and registration etc as well as the nature of the maintenance.</i>			
Experience Log completed		Approval required for period	
Yes <input type="checkbox"/>	No <input type="checkbox"/>	From	To

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Receipt No.	Receipt Date	W/R No.
AMELI		

3. Experience Log

<i>Detail experience relevant to the maintenance privileges you are applying for.</i>	Date		Aircraft or Component	Experience Details (<i>Concise accurate statements – print clearly</i>)
	From	To		

4. Fees (incl GST)

The fee is \$266.00. <i>Unless the full fees are paid, applications will not be processed.</i>	Visa <input type="checkbox"/> Mastercard <input type="checkbox"/> Expiry Date (mm/yy) /
	Name on Card
	Card Number
DO NOT SEND CASH. Please fill in credit card details.	

5. Declaration

<i>The provision of false information or failure to disclose information relevant to the grant or holding of an aviation document constitutes an offence under Section 49 of the Civil Aviation Act 1990 and is subject, in the case of an individual, to imprisonment for a term not exceeding 12 months or to a fine not exceeding \$10,000.</i>	I declare that to the best of my knowledge and belief the statements made and the information supplied in this application and the attachments are complete and correct.		
	Consent to Disclosure & Collection I authorise the collection by the Director of Civil Aviation or his delegate (hereinafter referred to as "the Director") from, and the disclosure to the Director by, any person, organisation or government department of any details of my knowledge & compliance with transport safety regulatory requirements.		
	I authorise the Director to use, and disclose, the information obtained about me for any purpose under the Civil Aviation Act 1990, or other such purpose permitted by law.		
Applicant's Signature		Date	

5. Applicant's Check List

<p><i>Please ensure all documents are enclosed. Applications which are incomplete or lacking any required documents will be returned.</i></p>		Yes	N/A
	1. Fee completed	<input type="checkbox"/>	
	2. Specimen Signature at top of page one	<input type="checkbox"/>	
	3. Name and ID completed at the top of pages two and three	<input type="checkbox"/>	
	4. Fit and Proper Person Questionnaire – either 24FPP or 24FPPDEC	<input type="checkbox"/>	<input type="checkbox"/>
	5. Old maintenance approval document enclosed	<input type="checkbox"/>	<input type="checkbox"/>
	6. Relevant course certificates, examination certificates and PTR enclosed	<input type="checkbox"/>	<input type="checkbox"/>

Post this form to:
Civil Aviation Authority, PO Box 3555, Wellington 6140, New Zealand

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Examinations										Yes	No	N/A					
Required										Experience Log Satisfactory	<input type="checkbox"/>	<input type="checkbox"/>					
Passed										Fee Correct	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
Comments										Course/Exam completed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
Assessing Person										Date							

Full wording of requested Maintenance Approval