



Namibia Civil Aviation Authority

## **Aviation Directive**

Reference Number: 1/2/3-5

Flight Operations

April 2021

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**APPLICATION FOR AOC ISSUE, AMENDMENT,  
RENEWAL**



## **1. Legal Authority**

Pursuant to Section 38 (6) of the Civil Aviation Act 2016. (Act no of 2016 – hereinafter “the Act”) the Executive Director may issue a permission, approval or procedure, or the imposition of a condition, restriction, or prohibition which the Executive Director believes on reasonable grounds to be:

(a) consistent with the objectives of applicable regulatory requirements, procedures, or documents: and

necessary and expedient to better achieve the objects of the Act.

**This AD is considered appropriate for the reasons mentioned herein below**

## **2. Background**

- 2.1. NAMCATS 121 Annexure C, NAMCATS 127 Annexure B, and NAMCATS 135 Annexure C contain the application form for issue, amendment, and renewal of an air operator certificate.
- 2.2. It has become apparent that the form currently used is inadequate and does not sufficiently cover all the data required by an AOC applicant.

## **3. Purpose**

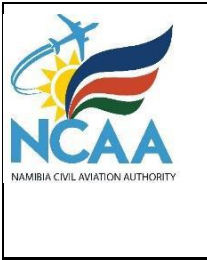
ICAO Annex 6 Parts I, II and III require States to issue an AOC and Ops Spec to applicants who wish to conduct commercial operations. Due to the complexity of the application for an AOC and Ops Spec a dedicated form is needed, which has content more far reaching than that currently contained in the CATS.

## **4. Applicability/Issued To**

This Directive applies to all commercial air operator certificate holders issued in terms of NAMCARS 121, 127 and 135.

## **5. Action Required/Expected**

- 5.1. All commercial operators who wish to apply for the issue, amendment, or renewal of an AOC shall use the form contained in Annexure A to this document.



**6. Effective Date**

The Directive shall be in effect from 30th April 2021 and shall remain in effect until superseded by amendment or withdrawn.

For further guidance, please contact email [sos.ops@ncaa.com.na](mailto:sos.ops@ncaa.com.na).

**7. Issued By:**

  
Gordon Elliott  
INTERIM EXECUTIVE DIRECTOR

DATE:

*28 April 2021.*





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ANNEXURE A



Private Bag 12003 Windhoek Namibia | (Tel) +264 83 235 2100 | (Web) <http://www.ncaa.com.na>

**APPLICATION FOR THE ISSUING OF AN AIR OPERATOR CERTIFICATE;  
APPLICATION FOR THE AMENDMENT OF AN AIR OPERATOR CERTIFICATE;  
APPLICATION FOR THE RENEWAL OF AN AIR OPERATOR CERTIFICATE.**

**Notes:**

- (i) An application for the issuing of an air operator certificate, or an amendment thereof, must comply with the provisions of NAMCAR 121.06.5/127.06.5/135.06.5
- (ii) An application for the renewal of an air operator certificate, must comply with the provisions of the NAMCAR 121.06.15/127.06.15/135.06.15
- (iii) Section 1-8 must be completed in all cases
- (iv) All other sections must be **completed if applicable** to the specific application.
- (v) The original application must be submitted to the Civil Aviation Authority.
- (vi) Where the required information cannot be furnished in the space provided, the information must be submitted as a separate memorandum and attached hereto.
- (vii) Please delete if not applicable.

Mark the appropriate block

- Application for the issuing of an air operator certificate (complete all applicable)
- Application for the amendment of an air operator certificate (complete 1-20 and any applicable)
- Application for the renewal of an air operator certificate (complete 1-20)

**1. Particulars of the AOC Applicant / Holder**

Full Name:

**2. Trade Name, if any:**

**3. Principal place of business** (include Physical Address) (do not use a post office box).

:

**4. Postal address** of the principal (main) base where operations will be conducted.



5. Telephone Number:

6. Fax Number:

7. Cell phone number:

8. Email address:

9. SITA Code (if issued):

10. Maintenance base (Address)

Description of facility

11. Line stations or Satellite Base

a) Line Station

Description of facility

b) Line Station

Description of facility

c) Line Station

Description of facility



**12. Description of proposed operations:**



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<p><b>13. Aircraft maintenance arrangements</b></p>	<p><b>Key maintenance management personnel (last name, first name, middle name, attach resume/CV for all these position):</b></p>	

**14. Operational management personnel (fill in if changed – and attach CV)**

Key post holder	Name	Contact	
		Telephone	Email
Accountable manager			
Person responsible for flight operations (PRFO)			
Person responsible for			



aircraft maintenance (PRAM)			
Person responsible for crew training (PRCT)			
Person responsible for ground operations (PRGO)			
Safety manager			
Quality manager			
Security manager			

State in respect of the following documents, date (s) of submission, approval ref no. date (s):

**15. Operator management documentation:**

**Operations Manual set:**

-Submission date:

-Approval ref. no. and date:

**Maintenance control manual:**

Submission date:

Approval ref. no. and date:



**16. Current AOC held (attach a copy):**

Certificate No.

Date of issue:

Issuing Authority:

**17. Current Air Service Licence held (attach a copy):**

Certificate No.

Date of issue:

**18. If a foreign registered aircraft is intended to be used list the state of registry:**

**19. In respect of each aircraft type to be included in the AOC (if changed), please indicate the following:**

**Aircraft Model and registration:**

**Types of Commercial Operations:**  Passengers  Cargo  Other n/a

**Areas of Operation:**

**Special Limitations:** n/a

SPECIFIC APPROVAL	YES	NO	DESCRIPTION	REMARK
Dangerous Goods	<input type="checkbox"/>	<input type="checkbox"/>		
Low Visibility Operations				
Approach and landing	<input type="checkbox"/>	<input type="checkbox"/>		
Take-off	<input type="checkbox"/>	<input type="checkbox"/>		
Operational Credits	<input type="checkbox"/>	<input type="checkbox"/>		
RVSM <input type="checkbox"/> n/a	<input type="checkbox"/>	<input type="checkbox"/>		



EDTO <input type="checkbox"/> n/a	<input type="checkbox"/>	<input type="checkbox"/>	Threshold time: Maximum diversion time:	
AR navigation specifications for PBN operations	<input type="checkbox"/>	<input type="checkbox"/>		
Continuing airworthiness	<input type="checkbox"/>	<input type="checkbox"/>	Organization Responsible for Aircraft Maintenance:	
EFB	<input type="checkbox"/>	<input type="checkbox"/>		
Other	<input type="checkbox"/>	<input type="checkbox"/>		
	<input type="checkbox"/>	<input type="checkbox"/>		
	<input type="checkbox"/>	<input type="checkbox"/>		
	<input type="checkbox"/>	<input type="checkbox"/>		
	<input type="checkbox"/>	<input type="checkbox"/>		

**20. Aircraft Data**

Provide detailed list of aircraft with individual registration markings, passenger seats, cargo loading, and communications/navigation equipment installed)

**21. Maintenance Schedule/Programme:**

Submission Date:

Approval ref. no. and date:

**22. Crew Training (Provide details of operations training for all crew positions):**



**23. Minimum Equipment List:**

Submission date

Approval ref. no. and date:

**24. Aircraft technical log:**

Submission date:

Acceptance ref. no and date:

**25. Contracted maintenance (technical specifications of maintenance contract and Namibian AMO approval must be attached)**

- Type/Level of check/inspection to be handled:
- Others:
- Namibian AMO approval:
- Reference No.:
- Date of first issue:
- Expiration date:

Name and designation of nominated person for liaison with contracting organisation on airworthiness matters:

**26. Particulars of maintenance personnel, if own AMO, including age, nationality, licence / qualification (ratings and currency) and experience (please attach list):**

**27. Training arrangements for personnel responsible for supervising the engineering support for aircraft to be included in the AOC (this should be made before introducing the aircraft into service) – type of training and number of personnel involved to be stated in respect of the following:**

Management:



Supervision:

Quality Assurance:

Maintenance Personnel

(attach further details as necessary)

**28. Mandatory Occurrence Reporting (state office (post holder) responsible:**

**29. Is an airworthiness occurrence control system in place? Yes  No**   
if yes, state:

- Method of operations:
- Procedures for ensuring that organisation responsible for type certification of each aircraft type receives adequate reports of occurrences:

**30. In respect of each aircraft type to be included in the AOC, please indicate:**

- Particulars of crew members and operations personnel including age, nationality, licence, qualifications (ratings and currency on assigned aircraft) and experience ( list to be attached):
- Training arrangement for personnel responsible for flight operations of aircraft to be included in the AOC (this should be made before introducing the aircraft into service) – state type of training and number of personnel involved, including Cabin Crew and ground operations personnel (list to be attached):

**31. Last audit/inspection of operator's organisation carried out by NCAA:**

Location(s)

Date (s)

**32. Fee Paid:**

Amount:

Receipt:

Date:



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Name:

Signature:

Designation:

Date:

**Note:**

- (i) An application for the issue of an air operator certificate, shall be submitted to the Executive Director at least 90 days before the date of commencement of the intended operation.
- (ii) An application for the amendment of an air operator certificate, shall be submitted to the Executive Director at least 30 days before the date of commencement of the intended amendment.
- (iii) The holder of an air operator certificate shall at least 30 days immediately preceding the date on which the certificate expires, apply for the renewal of such certificate. (2) The provisions of regulations 121.06.5(1) and 121.06.6, 127.06.5(1) and 127.06.6, and 135.06.5(1) and 135.06.6 shall apply *mutatis mutandis* to an application for renewal of a certificate made in terms of this regulation.
- (iv) The Authority must be given at least 10 days prior notice of a proposed change of a nominated post holder.
- (v) The appropriate fee prescribed in Part 187.

**33. Proof of Financial Capability: (Attachment)**

**34. Security Program: (Attachment):**

***INDICATE N/A IF NOT APPLICABLE.***



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**TO BE COMPLETED BY THE NCAA**

**(i) Received by (Name & Signature):**

\_\_\_\_\_

**(ii) Date:** \_\_\_\_\_

**(iii) Assignment file no.**

**(iv) Officers assigned for assessment:**

**Date forwarded to assigned officers:**

**Senior Manager Flight Operations Remarks:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Signed:** \_\_\_\_\_

**Date:** \_\_\_\_\_