



Personnel Licensing

FSS PEL 141-06

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AVIATION TRAINING ORGANISATION APPLICATION FOR ADDITIONAL AIRCRAFT

PART 1 GENERAL

Full Company name:			
Trade Name:			
ATO Name: (if different):			
Responsible Person:			
Telephone number:		Fax Number:	
Email Address		ATO Number:	

PART 2 AIRCRAF DETAILS

Details of aircraft to be added

Number	Aircraft Type	Registered Owner	Registration
1			
2			
3			
4			
5			
6			

Status of aircraft documents (submit copies with application)

Aircraft 1

Radio Licence	Yes	No	Certificate of registration	Yes	No
Certificate of Airworthiness	Yes	No	Certificate of Release	Yes	No
Lease agreement	Yes	No	Insurance cover	Yes	No

Special instructions:

Aircraft 2

Radio Licence	Yes	No	Certificate of registration	Yes	No
Certificate of Airworthiness	Yes	No	Certificate of Release	Yes	No
Lease agreement	Yes	No	Insurance cover	Yes	No

Special instructions:

Aircraft 3

Radio Licence	Yes	No	Certificate of registration	Yes	No
Certificate of Airworthiness	Yes	No	Certificate of Release	Yes	No
Lease agreement	Yes	No	Insurance cover	Yes	No

Special instructions:

Aircraft 4

Radio Licence	Yes	No	Certificate of registration	Yes	No
Certificate of Airworthiness	Yes	No	Certificate of Release	Yes	No
Lease agreement	Yes	No	Insurance cover	Yes	No

Special instructions:

Aircraft 5									
Radio Licence	Yes		No		Certificate of registration	Yes		No	
Certificate of Airworthiness	Yes		No		Certificate of Release	Yes		No	
Lease agreement	Yes		No		Insurance cover	Yes		No	
Special instructions:									

Aircraft 6									
Radio Licence	Yes		No		Certificate of registration	Yes		No	
Certificate of Airworthiness	Yes		No		Certificate of Release	Yes		No	
Lease agreement	Yes		No		Insurance cover	Yes		No	
Special instructions:									

PART 3 APPLICANT DECLARATION

I herewith certify that above-mentioned aircraft is/are airworthy in all respects and that the above documentation is valid.

Signature of Responsible Person		Date:	
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PART 5: TO BE COMPLETED BY NCAA

Received by NCAA on									Remarks:	
	Y	Y	Y	Y	M	M	D	D		
SIGNATURE OF INSPECTOR			NAME IN BLOCK LETTERS				DATE			

NOTICE: The, NCAA, will not undertake a quality assurance role with regard to any form or document submitted in application for a service. Documentation that contains errors or does not meet regulatory requirements will be returned for correction.