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| **References:**   * CAR 91.109   **Instructions:**   1. This application is for approval of Aircraft Flight Manual (AFM) / Supplement in accordance with CAR Part 91.109. 2. Entries should be typed or printed in block letters. Full model and component designations are required (refer to the manufacturer’s data plates).   *Note: Applicants should clearly understand that unless all the entries on this form are completed accurately and fully, the approval of the Aircraft Flight Manual may be delayed.*   1. Applications must be submitted to CASA not less than 28 days prior to the date required. 2. This form must be accompanied together with the Form CA 91/05 Appendix 1. 3. The completed Aircraft Flight Manual (AFM) application form together with the fee of K1320.00 (GST Inclusive) should be submitted to:   **Director**  **Civil Aviation Safety Authority**  **P O Box 1941**  **BOROKO N.C.D**  **Papua New Guinea** |

## Section A: Aircraft Operator Details

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| a. Legal Name of Organisation: |  | | | | | | |
| b. Client ID *(if known)* |  |  |  |  |  |  | |
| c. Postal Address of Organisation: |  | | | | | | |
| *(Address for Service – Ref* |  | | | | | | |
| *Civil Aviation Act Section 48)* |  | | | | | | |
| Telephone: |  | | | | Email: | |  |
| d. Person who can be contacted for further information concerning this application: | | | | | | | |
| Name: |  | | | | | | |
| Position: |  | | | | | | |

**Section B: AFM Details**

|  |  |
| --- | --- |
| Aircraft type and model to which the AFM applies: |  |
| AFM Name or Reference Number: |  |

Section C: Application Type

|  |  |  |
| --- | --- | --- |
| New Issue | Complete Re-Issue | Revision |

Section D: Application Checklist

|  |  |  |
| --- | --- | --- |
| Does the AFM contain: | | |
| Defect recording and tracking procedures or reference to their location in another document: | | |
| Standard AFM format: | Reference to the base document AFM: | LEP to define the approved document |

## Section E: Declaration

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| I hereby apply on behalf of the operator detailed in Section A for the approval of the Aircraft Flight Manual specified in Section B above.  Full Name:     \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Signature:     \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Date:      /     / |

**CASA Use Only**

Date received:       /      /      AFM Approved Yes  No  Job No:

Assessed by:        (Airworthiness Inspector) Date:      /     /