



TTCAA Safety Regulations

Pursuant to Trinidad and Tobago Civil Aviation Regulations, 2004.

APPLICATION FOR INITIAL ISSUE, RENEWAL AND CHANGES OF APPROVED MAINTENANCE ORGANISATION CERTIFICATE AND RATINGS

Trinidad and Tobago Civil Aviation Authority		Application for Initial Issue, Renewal and Changes of Approved Maintenance Organisation Certificate and Ratings		
1. Approved Maintenance Organisation Name, Number, Location and Address		2. Reasons for Submission		
a. Official Name of Maintenance Organisation:	Number:	<input type="checkbox"/> Original Application for Certificate and Rating <input type="checkbox"/> Renewal <input type="checkbox"/> Change in Rating <input type="checkbox"/> Change in Location or Housing and Facilities <input type="checkbox"/> Change in Ownership <input type="checkbox"/> Other (Specify)		
b. Location where business is conducted:				
c. Official Mailing Address of Approved Maintenance Organisation (Number, Street, City, State, & Zip)				
d. Doing Business As:				
e. Line Maintenance Location				
3. Ratings Applied for:				
Aircraft <input type="checkbox"/> A1 – Aeroplane > 5700Kg <input type="checkbox"/> A2 – Aeroplane < 5700 Kg <input type="checkbox"/> A3 – Rotorcraft	Engine <input type="checkbox"/> B1 – Turbine <input type="checkbox"/> B2 – Piston <input type="checkbox"/> B3 – APU	<input type="checkbox"/> C 1 <input type="checkbox"/> C 2 <input type="checkbox"/> C 3 <input type="checkbox"/> C 4 <input type="checkbox"/> C 5	Components <input type="checkbox"/> C 6 <input type="checkbox"/> C 7 <input type="checkbox"/> C 8 <input type="checkbox"/> C 9 <input type="checkbox"/> C 10	<input type="checkbox"/> C 11 <input type="checkbox"/> C 12 <input type="checkbox"/> C 13 <input type="checkbox"/> C 14 <input type="checkbox"/> C 15 <input type="checkbox"/> C 16 <input type="checkbox"/> C 17 <input type="checkbox"/> C 18 <input type="checkbox"/> C 19 <input type="checkbox"/> C 20
<input type="checkbox"/> Specialised Service (List Process Specification(s))				
4. List of Maintenance Functions contracted to an outside Organisation:				
5. Applicants Certification				
Name of Owner (Include name(s) of individual Owner, all partners, or corporation name given the state, province, or country and date of incorporation)				
I hereby certify that I have been authorised by the approved maintenance organisation identified in Item 1 above to make this application and that statements attached hereto are true and correct to the best of my knowledge.				
Date:	Authorised Signature:	Print Name of Authorised Signature:	Title:	

