

**Appendix (1)**

**. PROSPECTIVE OPERATOR'S PRE-APPLICATION) ----- (FRONT PAGE)**

Prospective Operator's Pre-Application Statement (To be completed by Air Operator or Approved Maintenance Organisation)		
<b>Section 1A. To be completed by all applicants</b>		
1. Name and mailing address of company (include business name if different from company name)	2. Address of the principal (main) base where operations will be conducted, include address of secondary base of operation, if appropriate (do not use a post CAA officers box).	
3. Proposed Start-up Date:	4. Requested company identifier in order of preference 1.                                    2.                                    3.	
5. Management and Key Staff Personnel		
<b>Name (Surname) (First Name/s)</b>	<b>Title</b>	Telephone & address if different from company (Include country code)
	President and Accountable Manager Director of Operations and Dispatch Director of Maintenance. Quality Manager Chief Pilot Director of Training. Director of Safety	
<b>Section 1B. To be completed by Air Operator and/or Approved Maintenance Organisation</b>		
6. <input type="checkbox"/> Air Operator intends to perform its maintenance as an AMO (Complete Block 7 & 8) <input type="checkbox"/> Air Operator intends to arrange for maintenance and inspections of aircraft and associated equipment to be performed by others (Complete Blocks 7 & 11) <input type="checkbox"/> Air Operator intends to perform maintenance under an equivalent system (Complete Blocks 7 & 11) <input type="checkbox"/> Approved Maintenance Organisation (Complete Block 8)		
7. <b>Proposed type of operation (Check as many as applicable)</b>	8. <b>Proposed type of Approved Maintenance Organisation Rating(s)</b>	
Air Operator Certificate – Part 4 <input type="checkbox"/> Passengers and Cargo <input type="checkbox"/> Cargo Only <input type="checkbox"/> Scheduled Operations <input type="checkbox"/> Charter Flight Operations	Approved Maintenance Organisation Part5 <input type="checkbox"/> Airframe <input type="checkbox"/> Power plant <input type="checkbox"/> Propeller <input type="checkbox"/> Avionics	<input type="checkbox"/> Computers <input type="checkbox"/> Instrument <input type="checkbox"/> Accessory <input type="checkbox"/> Specialised Service
Section 1C. Blocks 9 and 10 to be completed by Air Operator.		
9. Aircraft Data (For foreign registered aircraft, please provide a copy of the lease agreement)	10. Geographic areas of intended operations and proposed route structure	
Numbers and types of aircraft (By make, , and series)	Number of passengers seats or cargo payload capacity	

## PROSPECTIVE OPERATOR'S PRE-APPLICATION STATEMENT ----- (BACK PAGE)

Section 1D. To be completed by all applicants		
<b>11. Additional information that provides a better understanding of the proposed operation or business,</b> <b>12. Financial data and a business plan</b>  (Attach additional sheets, if necessary)		
13. Proposed Training (Aircraft and/or Simulator)		
14. The Statement and information contained on this form denotes an intent to apply for a SCAA certificate.		
Type of Organisation:		
Signature	Date (day/month/year)	Name and Title
Section 2. To be completed by the SCAA Official		
Received by (Name and CAA officers):		Date received (day/month/year)
Date forwarded to Director Civil Aviation (DCA) (day/month/year):	For: <input type="checkbox"/> Action <input type="checkbox"/> Information only	
Remarks:		
Section 3. To be completed by the CAA officers		
Received by:	Pre-application Number:	
Date (day/month/year):	Assigned Certification Number:	
Local CAA officers assigned responsibility:	Date forwarded to local CAA officers: (day/month/year)	
Remarks:		