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| **Instructions:**1. The application for the renewal of Air Operator Certificate (AOC) shall be submitted at least **120 days**, or as otherwise agreed, before the end of the existing period of validity.
2. The application for the renewal of Dangerous Goods Permit (DG Permit) shall be submitted at least **90 days**, or as otherwise agreed, before the end of the existing period of validity.
3. This application is for requesting the renewal of AOC and/or DG Permit that the operator has previously certified and/or authorized. If it is an amendment to an existing operation, an air operator shall submit the request under variation application package.
4. If the operator requests for the renewal of AOC and DG Permit at same time, tick both boxes and complete all section except section 6.
5. Renewal of AOC only, the operator shall complete all section except section 4 and 6.
6. Renewal of DG Permit only, the operator shall complete section 1, 4 and 5
7. State “n/a” if not applicable, no leave blank
 |
| **Purpose for Renewal** |
| [ ]  Air Operator Certificate [ ]  Dangerous Goods Permit |
| **Section 1 To be completed by applicants**  |
| **1.1 Operator Name:** | **1.2 Address of the principle place of business:** |
| **Trading Name:** |
| **AOC Number:** | **Telephone:** |
| **AOC Expiry Date:** | **Fax:**  |
| **DG Permit Number:** | **E-mail:** |
| **DG Expiry Date:** |  |
| **1.3 AOL Number:** | [ ]  | **Scheduled Air Services** |
| **AOL Expiry Date:** | [ ]  | **Non-Scheduled Air Services** |
| **1.4 Name of the applicant’s legal representative:** | **Telephone:** |
| **E-mail:** |

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| **Section 2 To be completed by applicants**  |
| **2.1 Management and key staff personnel** |
| **Title** | **Name** | **Telephone, fax and e-mail** |
| The Accountable Manager |  |  |
| Head of Flight Operations |  |  |
| Head of Training |  |  |
| Head of Engineering |  |  |
| Head of Ground Operations |  |  |
| Head of Quality |  |  |
| Head of Safety |  |  |
| **2.2 Type of operation:**  |
| [ ]  | Passengers | [ ]  | Cargo  | [ ]  | Other: |
| **2.3 Area of operations:** |
| [ ]  | Domestic | [ ]  | International | [ ]  | Asia | [ ]  | Africa | [ ]  | Australia |
| [ ]  | Europe | [ ]  | North America | [ ]  | South America |
| [ ]  | Antarctica | [ ]  | Other: |
| **2.4 Air operator intends to** |
| [ ]  | Carried out Line Maintenance under privilege of AOCR (Appendix W) |
| [ ]  | Contracting out Line Maintenance Support |
| [ ]  | Contracting out Full Support of maintenance |
| [ ]  | Contracting out Ground Handling |
| [ ]  | Contracting out Engine Maintenance |

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| **2.5 Line maintenance details** |
| **Maintenance organization certificate number** | **Name** | **Location** |
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| **Section 3 To be completed by applicants**  |
| **3.1 Assessment of General, Legal and Economic Status** |
| **Item** | **Remarks****(Evidences / Attachment Reference No.)** |
| **A** | **The Legal Status of the Company** |
| A1 | Evidence for the registration as a Company  |  |
| A2 | The nature and scope of the Memorandum and Articles of Association to engage in the proposed activities |  |
| **B** | **The Economic Strength of the Company** |
| B1 | Latest consolidated financial statement |  |
| B2 | Profit and loss statement |  |
| B3 | Balance sheet: Cash Flow, Notes or Auditor’s Certificate |  |
| B4 | Group’s financial business plan |  |
| B5 | Forecast revenues |  |
| B6 | The applicants plan to fund itsessential safety related activities |  |
| B7 | Forecast expenditure |  |
| **C** | **Company’s Preparedness** |
| C1 | Statistics relating to existing air services have been taken in to account |  |
| C2 | Potential traffic on the proposed routes is analyzed |  |
| C3 | The need for air transport in the area concerned is justified |  |
| C4 | Feasibility Study Report/Marketsearch analysis  |  |
| C5 | Provisions in the existing Air Service Agreements to support the proposedServices |  |
| **D** | **The degree and nature of each member of the Board of Directors involvement in the Thailand civil aviation system** |
| D1 | Related experience (if any) within the transport industry |  |

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| **Item** | **Remarks****(Evidences / Attachment Reference No.)** |
| D2 | Knowledge of the applicable civil aviation system regulatory requirements |  |
| D3 | Any history of physical or mental health or serious behavioral problems |  |
| D4 | Any conviction for any transport safety offence, whether or not |  |
| D5 | The conviction was in a Thai court or in a court of foreign country |  |
| D6 | Any evidence that any member of the Board has been declared bankrupt or has held a position of a company which is declared bankrupt. |  |
| D7 | Any evidence that the person has committed a transport safety offence or has contravened or failed to comply with any rule made under the Air Navigation Act or Rule made hereunder |  |
| D8 | The attitude of the members of the Board of Directors towards adoption of a safety culture |  |
| **E** | **Insurance Arrangements: Whether the applicant has organized an adequate Insurance Policy from an Organization acceptable to CAAT in respect of;**  |
| E1 | Aircraft & Crew members |  |
| E2 | Passengers & Cargo |  |
| E3 | Third Party liabilities |  |
| **F** | **Arrangements in place to ensure regular and efficient air services** |
| F1 | Passenger Handling Arrangements |  |
| F2 | Ground Handling Arrangements |  |
| F3 | Reservations |  |
| F4 | Ticketing |  |
| F5 | Customer Relations |  |
| F6 | Denied Boarding Procedures |  |

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| **Item** | **Remarks****(Evidences / Attachment Reference No.)** |
| F7 | Mishandled Baggage Procedures |  |
| F8 | Sudden Change of Schedules |  |
| **G** | **Fares & Rates** |
| G1 | The applicant has submitted proposed fares & rates to CAAT for approval |  |
| G2 | Proposed fares and rates are just and fair |  |
| **H** | **Schedules** |
| H1 | Applicant has submitted the proposedSchedule of flights for the approval ofCAAT |  |
| H2 | Arrangements in place to obtainsubsequent changes to the approvedschedule |  |
| H3 | Monthly statistics relating to number ofpassengers and amount of cargotransported sector wise |  |
| H4 | Annual returns in respect of businessturn over including loss/profit andbalance sheet |  |
| H5 | Any other information as required byCAAT |  |
| Remarks: Refer to Notification of the Ministry of Transportation Re: Criteria and Conditions for Granting Licensing to Air Operation Business  |

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| **Section 4 Renewal Dangerous Goods Permit** |

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| **4.1 Nominated person for Dangerous Goods or Dangerous Goods Coordinator**  |
| **Name and contact details and responsible for carriage of dangerous goods by air in the organization** |
| **Name: .****Job title: .****Telephone: .****FAX: .****E-mail: .** | **Address: .**     |

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| **4.2 Aircraft Type(s):**  |  |
| **4.3 Classes of dangerous goods (Tick for Apply)** |
| [ ]  Class 1 [ ]  Class 4 [ ]  Division 6.2 [ ]  Class 9 [ ]  Class 2 [ ]  Class 5 [ ]  Class 7 [ ]  Class 3 [ ]  Division 6.1 [ ]  Class 8 [ ]  COMAT Only [ ]  Other (Please Specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

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| **4.4–** **Dangerous Goods Training Programme** |
| **Have the operator’s dangerous goods training programme recently been approved by CAAT?** [ ]  **Yes (Approval letter CAAT NO. 16 /\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**)[ ]  **No***Remark If more than one approval, the evidence shall be submitted as supporting document* |
| **4.5 – Operation Manual(s)** |
| **Has the current operator’s dangerous goods manual been updated and approved?** **Issue: \_\_\_\_Revision: \_\_\_\_ Approval Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_** | [ ]  **Yes** | [ ]  **No** | [ ]  **n/a** |
| **Has the current operator’s dangerous goods training manual been updated and approved?****Issue: \_\_\_\_Revision: \_\_\_\_ Approval Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_** | [ ]  **Yes** | [ ]  **No** | [ ]  **n/a** |
| **Has the current operator’s operations manual part A and D involving dangerous goods been updated and approved?****OM-A Issue: \_\_\_\_Revision: \_\_\_\_ Approval Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_****OM-D Issue: \_\_\_\_Revision: \_\_\_\_ Approval Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_** | [ ]  **Yes** | [ ]  **No** | [ ]  **n/a** |

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| **Section 5 To be completed by applicants** |
| **The operator shall mark the below items to ensure that following documents are submitted with this application:***\*mandatory document***1. Renewal of AOC and DG Permit at same time, the items A, B, C and E shall be applied.****2. Renewal of AOC only, the item A, B, C and E shall be applied.****3. Renewal of DG Permit only, the item A, D and E shall be applied.**

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| **A. Intention letter** | **YES** | **NO** | **N/A** |
| * An intention letter to apply for Air Operator Certificate/ DG Permit Renewal\*
 |[ ] [ ] [ ]
| **B. Application and Supporting Documents for AOC Renewal** |  |  |  |
| * CAAT-OPS-AOCFM-403 Application for Renewal of Air Operator Certificate and/or DG Permit\*
 |[ ] [ ] [ ]
| * Copy of the existing AOC\*
 |[ ] [ ] [ ]
| * Copy of the existing Operation Specifications and List of Authorized Aircraft for Specific Approval\*
 |[ ] [ ] [ ]
| * Copy of the existing Air Certificate License (AOL) \*
 |[ ] [ ] [ ]
| * List of Controlled Document and Manual \*
 |[ ] [ ] [ ]
| * Statement of Compliance Chapter 1 to 13 (CAAT-OPS-SOC-101 to CAAT-OPS-SOC-113 and/or CAAT-OPS-SOC-151) \*
 |[ ] [ ] [ ]
| * Copy of the existing Dangerous Goods Permit (If applicable)
 |[ ] [ ] [ ]
| * The status of the implementation of the corrective action(s) regarding the existing outstanding findings (if applicable)
 |[ ] [ ] [ ]
| * Other Document(s) (Specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
 |[ ] [ ] [ ]
| **C. Document pertaining to security requirements for AOC Renewal** |
| * Aircraft Operator Security Programme: AOSP\*

by submit to CAAT through email: sfd\_os@caat.or.th Sent Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Time: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ |[ ] [ ] [ ]
| **D. Application and Supporting Documents for DG Permit Renewal** |  |  |  |
| * CAAT-OPS-AOCFM-403 Application for Renewal of Air Operator Certificate and/or DG Permit\*
 |[ ] [ ] [ ]
| * Copy of the existing AOC\*
 |[ ] [ ] [ ]
| * Copy of the existing Operation Specifications and List of Authorized Aircraft for Specific Approval\*
 |[ ] [ ] [ ]
| * Copy of the existing Dangerous Goods Permit\*
 |[ ] [ ] [ ]
| * Dangerous Goods Manual\*
 |[ ] [ ] [ ]
| * Dangerous Goods Training Programme\*
 |[ ] [ ] [ ]
| * Other Document(s) (Specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
 |[ ] [ ] [ ]
| **E. Request for amendments to the manual and/or information in accordance with Article 3(15) of Civil Aviation Board Regulation No. 85 on Air Operator Certificate (If Applicable).** |  |  |  |
| - CAAT-OPS-AOCFM-204 Proposal of Manual Amendment Form |[ ] [ ] [ ]
| - Operator’s Manual or Documents (Specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |[ ] [ ] [ ]

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| 5.1 Additional information that provides a better understanding of the proposed operation or business (attach additional sheets, if necessary) |
| **I hereby apply for the renewal of an Air Operator Certificate and/or Dangerous Goods Permit and declare that the information given in this form is true in every respect.** |
| 5.2 Accountable Manager Name: | Signature |
| Date: (dd/mmm/yyyy) |

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| **Section 6 To be completed by CAAT** |
| Date forwarded to CAAT (dd/mmm/yyyy): | Date received (dd/mmm/yyyy):  |
| Received by (name and office): | Remarks: |
| Verified by POI: | Accepted by OPS Manager: |
| Principal Operations Inspector (POI) | (Flight Operations Standards Manager) |

Instructions for the completion of the Application for Renewal of Air Operator Certificate and/or Dangerous Goods Permit

Section 1 To be completed by applicants

Item: 1.1 Insert the Operator Name, Trading Name, AOC Number and Expiry Date, DG Permit Number and Expiry Date.

Item: 1.2 This address shall be the physical location where the primary activities are based. It is where the offices of management required by legislation are located. Insert the Telephone, Fax, E-mail and Type of operation.

Item: 1.3 Insert the AOL Number, Expiry Date and Type of operations.

Item: 1.4 The names, titles, telephone numbers and other contact details of application’s legal representative.

Section 2 To be completed by applicants

Item: 2.1 Enter the names, titles, telephone numbers and other contact details of management and key staff personnel.

Item: 2.2 Insert the Type of operation and the Other Special type of transportation. (e.g. emergency medical service).

Item: 2.3 Insert the Area of operations List the geographical area(s) of authorized operation, flight information as defined in Domestic, International (Asia, Africa, Australia, Europe, North America, South America, Antarctica, and other).

Item: 2.4 Insert Air operator intends for Airworthiness.

Item: 2.5 Insert Line Maintenance details.

Section 3 To be completed by applicants

Item: 3.1 Provide any information or attachments that would support the financial status.

Section 4 To be completed by applicants

Item: 4.1 Insert text for person or post holder is assigned responsibility for the Approval held including Job Title/Name and contact details.

Item: 4.2 Insert text for operator’s aircraft type(s).

Item: 4.3 Select classes of dangerous goods to apply

Item: 4.4 Provide any information for the operator’s dangerous goods training programme.

Item: 4.5 Provide any information for the operator’s operation manuals involving dangerous goods.

Section 5 To be completed by all applicants

Item: 5.1 Provide any information that would assist CAAT personnel in understanding the type and scope of the operation or business to be performed by the applicant.

Item: 5.2 Signature of the pre-assessment statement by the accountable manager denotes an intent to seek certification as an air operator or approval as a maintenance organization.

Section 6 To be completed by CAAT

 Where Renewal process is to be continued, CAAT will designate a POI and a certification team.