

THE CIVIL AVIATION AUTHORITY OF THAILAND APPLICATION FORM FOR REPAIR STATION CERTIFICATE

INSTRUCTIONS:

- 1. THIS APPLICATION CONTAINS 5 PAGES.
- 2. EACH APPLICATION SUBMITTED FOR APPROVAL OR RENEWAL MUST BE. ACCOMPANIED BY A DOCUMENT WHICH DESCRIBES THE ORGANIZATION.
- 3. TYPE ALL ENTRIES AND CHECK APPROPRIATE BLOCK.
- 4. THIS APPLICATION MUST BE COMPLETED AND SIGNED BY AN AUTHORIZED ADMINISTRATOR OR AUTHORIZED AGENT.
- 5. IF ADDITIONAL SPACE IS REQUIRED FOR ANY ITEM ATTACH ADDITIONAL SHEETS OF PAPER
- 6. THIS APPLICATION SHOULD BE SUBMITTED AT LEAST 60 DAYS IN ADVANCE.

APPLICATION FOR REPAIR STATION CERTIFICATE

	Initial appro	val					
	Renewal					(Repair Station Certificate Number)	
	Additional Rating / Change Location			Locat	ion	(Repair Station Certificate Number)	
. <u>RE</u>	PAIR STATI	ON NAM	/IE, AD	DRES	S AND	LOCATION.	
a.	Official name						
b.	Mailing address of repair station.						
C.	Location w	_ocation where repair station will conduct business.					
2. <u>RE</u>	PAIR STAT		/NER.				
	Individual ((name of	owner	·)			
	Partnership (name of partners)						
3. <u>APPLIC</u>	ATION IS HE	EREBY N	MADE I	FOR A	<u>REPA</u>	IR STATION CERTIFICATE AND/OR RATING(S) :	
		Class Rating					
RA	ATING:	1	2	3	4	Limited Rating	
Airfram	ıe						
	olant						
D Propel	ler						
🛛 Radio							
Instrun	nent						
Access	sory						
Other Limited Rating such as Landing Gear Component, Emergency Equipment, NDT etc.(List)							

4. <u>SUPERVISORY AND INSPECTION PERSONNEL.</u>

a. Officials responsible for station management.

Name	Title

b. Individuals responsible for final quality determination (attach employment summary

for each person listed. Summary shall be separate for each person and identified

by name and type of position, i.e., Chief Inspector, Technical Supervisor,

Shop Foreman, etc.).

Name	Title	License No. and Rating

5. <u>SIGNATURE OF INDIVIDUALS AUTHORIZED TO SIGN OFFICIAL RECORDS FOR</u> <u>THE REPAIR STATION.</u>

Name as Signed	Official Signature

6. <u>LIST OF MAINTENANCE FUNCTIONS CONTRACTED TO OUTSIDE AGENCIES</u>

7. <u>ATTACHMENTS</u>

The following document are required to submit for initial approval only

- Transmittal letter
- Copy of juristic person certificate
- Copy of financial statement
- Repair Station and Quality Manual (RSQM) or Maintenance Organization Exposition (MOE) or CAAT supplement
- □ Capability list with revision date and number
- □ Training manual
- □ SMS manual
- The following document are required to submit for certificate renewal only
- Transmittal letter
- Copy of the proof of the fee payment
- Repair Station and Quality Manual (RSQM) or Maintenance Organization Exposition (MOE) or CAAT supplement
- Capability list with revision date and number
- Repair Station Self Assessments Checklist (AIR/RI-012)

8. AUTHORIZED AGENT IN THAILAND

(A responsible person who represents an operator and who is authorized by or on

behalf of such operator to act on all formalities).

a.	Official Name:	
b.	Address:	
с.	Authorized Contact Person:	
	Tel:	e-mail:

9. <u>CONDITIONS FEES</u> (The rate is that prescribed by Ministry's regulation)

The following conditions will require fees:

- Initial certification.
- Renewal of the certificate
- Change in the location of the repair station.
- Adding a rating or certain service to the certificate.
- Oversight audits and surveillance of the repair station
- Inspection fee as per the following details
 - Daily service fee for each travel and audit/inspection day (The fee is charged per calendar day for the entire period of the mission including travel days from and to Bangkok.
 - The applicant is responsible to provide air ticket (unrestricted, refundable tickets) return air travel, ground transportation and hotel accommodation for CAAT Airworthiness Inspector who is assigned to perform the inspection of the repair station's facilities.

10. <u>APPLICANTS CERTIFICATION</u>

I hereby certify that I have been authorized by the Repair Station in Item 1 above to make this application, and that the information furnished herewith as a part of this application is true and correct.

(Authorized Signature)

(Title)

Date of Application _____