The Civil Aviation Authority of Thailand

Application for a Part DTO Initial / Change Approval

□ **Initial declaration**

□ **Notification of changes (1) – DTO reference number:**

1	**Declared training organisation (DTO)** Name:	
2	**Place(s) of business** **Contact details of the DTO's principal place of business:** **Address:** **Phone(s)/Fax:** **Email:**	
	Contact details of any other aerodrome or operating site (if applicable): **Address:** **Phone(s)/Fax:** **Email:**	
3	**Personnel** **Name and contact details of the representative:** **Name:** **Address:** **Phone(s)/Fax:** **Email:**	
	Head of Training (HT) **Name:** **Address:** **Phone:** **Email:**	**Deputy Head of Training (dHT)** **Name:** **Address:** **Phone:** **Email:**

4	**Training Scope**			
	Aeroplane ☐ _____ ☐ _____ ☐ _____ ☐ _____ ☐ _____	**Helicopter** ☐ _____ ☐ _____ ☐ _____ ☐ _____ ☐ _____	**Sailplane** ☐ _____ ☐ _____ ☐ _____ ☐ _____ ☐ _____	**Balloon** ☐ _____ ☐ _____ ☐ _____ ☐ _____ ☐ _____
	List of all training programmes used (documents to be attached to the declaration): ☐ _____ ☐ _____ ☐ _____			
5	**Training aircraft and FSTDs** List of aircraft used for the training (including their registration marks): ☐ _____ ☐ _____ List of qualified FSTDs used for the training (if applicable, including letter code as indicated on the qualification certificate): ☐ _____ ☐ _____			
6	**Aerodrome(s) and the operating site(s)** Contact details (address, phone, email) of all aerodromes and operating sites used by the DTO to provide the training: ☐ _____ ☐ _____			

7	**Date of intended commencement of training:** _____
8	**Statements** The DTO has developed a safety policy in accordance with TCAR PEL Part-DTO, and in particular with point DTO.GEN.210(a)(1)(ii) thereof, and will apply that policy during all training activities covered by the declaration. The DTO complies and will, during all training activities covered by the declaration, continue to comply with the essential requirements set out in TCAR PEL Personnel Licensing and Training Organisations and with the requirements of TCAR PEL Part-FCL and TCAR PEL Part-DTO We confirm that all information contained in this declaration, including its annexes (if applicable), is complete and correct. Name, date and signature of the representative of the DTO _____ Name, date and signature of the head of training of the DTO _____
	(1) in the case of chages, only point 1 and those fields containing changes need to be completed.
9.	CAAT Inspector signature accepted _____

Note: It is the responsibility of the DTO to arrange the successful submission of the declaration to the CAAT.

It will be sent to pel_to@caat.or.th.

If the DTO does not receive the acknowledgement of receipt of the declaration from the CAAT within 20 working days following the submission of the declaration, the DTO should contact the CAAT to investigate whether the submission of the declaration has been successful.

Annex I: Flight Instructors

List of flight instructors employed to provide the training courses offered

Please enter the name of the instructor, the type of Licence, the Licence number and employment type.

	Instructor Name	Type of Licence	Licence Number	Employment
1.				☐ Full Time ☐ Part Time
2.				☐ Full Time ☐ Part Time
3.				☐ Full Time ☐ Part Time
4.				☐ Full Time ☐ Part Time
5.				☐ Full Time ☐ Part Time
6.				☐ Full Time ☐ Part Time
7.				☐ Full Time ☐ Part Time
8.				☐ Full Time ☐ Part Time
9.				☐ Full Time ☐ Part Time
10.				☐ Full Time ☐ Part Time
11.				☐ Full Time ☐ Part Time
12.				☐ Full Time ☐ Part Time
13.				☐ Full Time ☐ Part Time
14.				☐ Full Time ☐ Part Time
15.				☐ Full Time ☐ Part Time
16.				☐ Full Time ☐ Part Time
17.				☐ Full Time ☐ Part Time
18.				☐ Full Time ☐ Part Time

Annex II: Aircraft

List of all aircraft used to provide training courses

Please identify the aircraft registration, type designation and IFR.

Type/Variant	Registration	Scope of Utilisation