APPLICATION FOR AN EXPORT AIRWORTHINESS APPROVAL

Instructions: This application is to be submitted to the DCA accompanied by all necessary supporting documents.

Use Part I for complete aircraft. Part II is for DCA use only.

**DEPARTMENT OF CIVIL AVIATION**

**APPLICATION FOR EXPORT CERTIFICATE OF AIRWORTHINESS**

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| **PART I (for Class I Products)** |
| 1. Application is made for an Export Certificate of Airworthiness to cover the product described below, which is:New Used (aircraft) Newly overhauled |
| 2. Aircraft registration | 3. Name and address of owner | 4. Contact information of owner (phone, email, …) |
| 5. Country of import | 6. Name and address of importer | 7. Aircraft category |
| 8. Description of product |
| Type | Make, type and model | Serial number | Type certificate or Spec. number | Operating Time (Hours) |
| Since overhaul | Total |
| a) Aircraft |  |  |  |  |  |
| b) Engines |  |  |  |  |  |
| c) Propellers |  |  |  |  |  |
| 9. Date of satisfactory flight test (if required) : |
| 10. Max taxi mass (Kg): | 11. Max take-off mass (Kg): |
| 12. Does the product comply with all applicable DCA regulations, airworthiness directives and other airworthiness requirements? |  | Yes | No (explain in “Remarks”) |
| 13. Have applicable special requirements of the importing State been complied with? |  | Yes | No (explain in “Remarks”) |
| 14. Location of aircraft for physical inspection: |

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| 15. Remarks : (Add extra sheets duly authenticated, if required) |
| 16. Declaration by person making the application:I hereby certify that the particulars given in this form are true in every respect. I further declare that all documents submitted in support of this application are true in every respect. |
| Name and title | Signature of applicant or authorized representative | Date |

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| **PART II - Approval (for DCA use only)** |  |
| 17. It is considered that an Export Certificate of Airworthiness may be issued to the product described in Part I which conforms to pertinent requirements except as noted in Item 15. |  |
| Name | Signature of Inspector | Date |  |