

APPLICATION FOR CHANGE OF SITE AND/ OR CHANGE TO TRAINING COURSE APPROVALS FOR APPROVED TRAINING ORGANISATIONS UNDER THE UK AIRCREW REGULATION (EU) No 1178/2011 (as amended) ANNEX VII - PART ORA (AEROPLANES AND HELICOPTERS)



Please read the included guidance notes before completing. Submission instructions can be found at the end of the form.

FALSE REPRESENTATION STATEMENT

It is an offence under the UK Air Navigation Order to make, with intent to deceive, any false representation for the purpose of procuring the grant, issue, renewal or variation of any certificate, license, approval, permission or other document. This offence is punishable on summary conviction by a fine, and on conviction on indictment with an unlimited fine or imprisonment or both.

1. APPLICANT TYPE

Limited Liability Partnership	Complete Section 2. a)	Public Educational Establishment	Complete Section 2. b)
Limited Company	Complete Section 2. a)	University/College	Complete Section 2. c)
Charity	Complete Section 2. b)	Individual (Sole Traders) Partnership	Complete Section 2. c)
Ministry of Defence	Complete Section 2. b)	Private Clubs	Nominated Representative to Complete Section 2. c)
Trust	Complete Section 2. b)		

2. APPLICANT DETAILS (The Applicant is the person responsible for payment of CAA charges)

a) A Company

Registered Company Name (in full):

Registered Company No.:

Country of Company Registration:

Registered Office Address: Postcode:

Telephone:

Email:

Trading name (if applicable):

Trading Address (Primary Site): Postcode:

Website Address:

Authorised Representative of Company

This application is to be signed by either a Director or Company Secretary or a person authorised by the board to act on behalf of the Company, and who is deemed to be the Accountable Manager in respect of applications under EASA Aircrew Regulation Annex VII – Part-ORA.

Title: Forename: Surname:

Position in company:

Telephone no: E mail:

If you are not a Director or Company Secretary and have been authorised to sign the application form on behalf of the Company, proof of that authority must be provided with the completed application form.

This application will be considered in respect of and if appropriate, granted to, the Company as registered under the Company Number provided on this form.

b) An Individual (including Sole Traders and Partnerships)

Title: Forename: Surname:

Address:

..... Postcode:

Telephone:

Email Address: Mobile Telephone:

Trading name (if applicable):

Website address:

A photocopy of your valid Passport or valid photo-card Driving Licence must accompany your application as proof of identification. Failure to supply proof of identification may result in a delay to the application processing time.

In the case of a partnership, please complete details of all partners. Continued on a separate sheet ☐ (if applicable)**2.TRAINING ORGANISATION CAA REFERENCE NO:****ATO/FTO/TRTO:**.....

Application for:

Addition of a course ☐ Change to an existing site ☐Addition of a new site ☐ Addition of a new FSTD ☐**Proposed Date for Training to commence:****3. FACILITIES** (please complete address as appropriate)

All training sites should be audited for suitability in advance of any training by the applicant organisation, and a statement of compliance made at Section 8 of this form. Where training is to be conducted from an unlicensed site it is recommended that the requirements stated in CAP793 are observed. The UK CAA reserves the right to audit a site in advance of granting approval for a new site.

New training site address:

1

.....
.....
Postcode:.....

Country:.....

New training site address:

2

.....
.....
Postcode:.....

Country:.....

New training site address:

3

.....
.....
Postcode:.....

Country:.....

4a. TRAINING COURSES REQUESTED: AEROPLANES AND HELICOPTERS

- **Site No. 1** will always be the Main / Primary Training site and the address and contact details for this site should be clearly identified in section 2 (or Section 5a if different to the addresses in Section 2)
- **Additional sites (i.e. Site Numbers 2 and onwards)** should be numbered in order of size/scale/scope of training at the site and Appendix A of the application form completed for each of these sites.
- **New Site only (Variation to approval):** Please enter capital letter 'V' under Site Number column in tables below to reflect which courses are being requested for the new Site / Base (or where more than one new site being applied for, please enter V1 for first site variation, V2 for second site variation etc.).
N.B. Res = Residential course, DL = Distance Learning course

Course Name	Tick if Req.	Please tick Aeroplane or Helicopter etc. (where not already specified)	Site No. (see above)	Max. No. Students
LAPL	☐	A ☐ H ☐		
LAPL extension course (please confirm from which aircraft to which aircraft)	☐	A ☐ H ☐		
PPL	☐	A ☐ H ☐		
LAPL to PPL upgrade	☐	A ☐ H ☐		
LAPL inc. TMG to PPL upgrade	☐	Aeroplane		
MPL	☐	Aeroplane		
ATPL/IR Integrated	☐	A ☐ H ☐		
ATPL VFR Integrated	☐	Helicopter		
ATPL Modular Flight	☐	A ☐ H ☐		
ATPL Modular Theoretical Knowledge	☐	A ☐ H (VFR) ☐ H (inc. IR) ☐ Res* ☐ DL* ☐		
CPL/IR Integrated	☐	A ☐ H ☐		
CPL Integrated	☐	A ☐ H ☐		
CPL Modular Flight Training	☐	A ☐ H ☐		
CPL Modular Theoretical Knowledge *(please indicate if Residential or Distance Learning)	☐	A ☐ H ☐ Res* ☐ DL* ☐		
IR Modular Flight Training	☐	Aeroplane		
IR Modular Theoretical Knowledge	☐			
IR Modular Flight Training	☐	Helicopter		
IR Modular Theoretical Knowledge	☐			
Class Rating: Single Pilot Multi Engine Piston	☐	Aeroplane		
MCC (Modular)	☐	A ☐ H ☐		
APS MCC	☐	Aeroplane		
MCC combined with Type Rating(s) (see Part 4f)				
Class / Type specific courses (see Part 4f)				
Aerobatic Rating	☐	Aeroplane		
Sailplane Towing Rating	☐			
Banner Towing Rating	☐	A ☐ H ☐		
Night Rating	☐	A ☐ H ☐		
Mountain Rating (Aeroplane or TMG)	☐	Aeroplane ☐ TMG ☐		
Advance Upset Prevention and Recovery Training	☐	Aeroplane		

4b. TRAINING COURSES REQUESTED: FLIGHT TEST RATING COURSES				
Course Name (continued)	Tick if Required	Category (please specify 1, 2, 3 or 4)	Site No. (See 4a)	Maximum No. Students
Flight Test Rating	☐			
Flight Test Rating extension course	☐	Category 2 to Category 1		
Flight Test Instructor	☐			

4c. TRAINING COURSES REQUESTED: AEROPLANE AND HELICOPTER INSTRUCTOR COURSES				
Course Name	Tick if Required	Please tick Aeroplane or Helicopter (where not already specified)	Site No. (See 7a)	Maximum No. Students
Flight Instructor	☐	A ☐ H ☐		
Class Rating Instructor SE	☐	Aeroplane		
Class Rating Instructor ME	☐			
Instrument Rating Instructor	☐	A ☐ H ☐		
Multi Crew Co-operation Instructor	☐	A ☐ H ☐		
Mountain Rating Instructor	☐	Aeroplane		
Class / Type Rating Single Pilot Aeroplane	☐	Seaplane		
Upset Prevention and Recovery Training Instructor	☐	Aeroplane Only		
Other (please specify):	☐			
Instructor Courses continued: (type or class specific)	Tick if Required	Type and Category (state Aircraft or FSTD where appropriate & note comment below)	Site No. (See 4a)	Maximum No. Students
Type Rating Instructor SPA	☐			
Type Rating Instructor MPA	☐			
Type Rating Instructor (H)	☐			
Synthetic Flight Instructor	☐			
Other (please specify)	☐			
Please use the UK aeroplane and helicopter lists in respect of Class/ Type / Variant/Series etc.				

4d. TRAINING COURSES REQUESTED: AEROPLANE AND HELICOPTER EXAMINER COURSES				
Examiner Courses continued (type or class specific)	Tick if Required	Type /Class (please specify)	Site No. (See 4a)	Maximum No. Students
TRE (A)	☐			
TRE(H) SP ME	☐			
TRE (H) MP ME	☐			
TRE(H) SP to MP upgrade	☐			
Please use the UK aeroplane and helicopter lists in respect of Class/ Type / Variant/Series etc.				

4e. TRAINING COURSES REQUESTED: ASSESSOR OF LANGUAGE PROFICIENCY IN ENGLISH			
Course Name	Tick if Required	Site No. (See 4a)	Maximum No. Students
Assessor of Language Proficiency in English	☐		

4f. TRAINING COURSES REQUESTED: CLASS / TYPE RATING SPECIFIC COURSES

Site	Class / Type / Variants	Single- Pilot	Multi- Pilot	With Combined MCC	With ZFTT	Differences course From - To	Prior Experience Course. e.g. CCQ/STAR course

- Please refer to the UK aeroplane and helicopter lists in respect of Class/ Type / Variant/Series etc at

4g. SYNTHETIC FLIGHT TRAINING

Course FSTD used on	Base	Serial no / Approval no:	Level (i.e. FNPT1, FNPT2, BITD or Simulator A,B,C,D)		Course FSTD used on	Base	Serial no / Approval no:	Level (i.e. FNPT1, FNPT2, BITD or Simulator A,B,C,D)

5. DECLARATION

COMPLIANCE

I hereby declare that an internal compliance audit of the following items, as appropriate to this application, has been completed and all findings and issues addressed; and the items indicated are compliant with the UK Aircrew Regulation No 1178/2011 (as amended) – Part ORA. Specifically:

- ☐ I confirm that the organisation has sufficient staff to conduct the training applied for and that the staff meet the requirements of ORA.ATO.110 and ORA.ATO.210.
- ☐ As applicable to my application, I confirm that accommodation and facilities comply with ORA.GEN.215 and ORA.ATO.140 and that training aircraft and FTSDs comply with ORA.ATO.135 and ORA.FTSD.115.
- ☐ I include a draft amendment to the Operations Manual and supporting data in respect of this application (Staff Details, Training Aircraft or Site Plans etc).
- ☐ I confirm that the Training Course(s) applied for on this application meet the requirements of Aircrew Regulation – Part-FCL.
- ☐ I agree to pay any additional charges which may become payable in respect of this application under the Scheme of Charges.

I declare that to the best of my knowledge the particulars entered on this application are accurate

Name of Applicant:..... (as shown in 2a) or 2b))

Signature of Applicant (Named in 1a)

Or Signature of Authorised Representative (named in 1a):

Date:

6. NOTES

Prior to submission, please ensure that:

- a) The application form is complete and signed by an authorised representative of the company.
 - b) All supporting documentation, including a copy of the draft amendment to the Operations Manual, site plans, course details etc are included with the submission.
 - c) The compliance declaration is complete.
- For an individual applicant, please provide proof of ID (suitably certified copy of Passport or Driving Licence).
 - If you are not a Director or Company Secretary and have been authorised to sign the application form on behalf of the Company, please enclose proof of that authority

7. APPLICATION FORM SUBMISSION SERVICE (SUBMIT)

Once you have completed your application form, please save a copy to your device. Click on the button below to submit your application and supporting documentation (if applicable). You will be required to upload a copy of the completed application form as part of the submission.

The button will direct you to the CAA Customer Portal. The first time you access the CAA Customer Portal you will need to create a user account, there are instructions provided and it only takes a few minutes to register. If you have used the CAA Customer Portal before, please log in to your existing user account.

After receipt of your application, we will contact you using the contact details provided on this form to request payment of the relevant application fee. Please indicate your preferred payment method:

☐

Email (you will receive a secure payment link from 'noreply@payments.caa.co.uk')

☐

SMS (you will receive a secure payment link from 'CAA PAYMENTS')

Please note: Your application will not be processed until you have submitted it via the CAA Customer Portal and provided the supporting documentation (if applicable).

The charge(s) required will be calculated in accordance with the current CAA Scheme of charges [List of Official Record Series 5 - Scheme of Charges \(caa.co.uk\)](#)

Important: Please save your completed form before proceeding.

Application Form Submission Service

If you prefer, you can access the service by logging onto the CAA Customer Portal via <https://portal.caa.co.uk> and selecting the Application Form Submission Service.

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GUIDANCE NOTES



- **Registered Company Name and number:** this is the name and reference number of the company as registered with Companies House or as detailed on the Company Certificate of Incorporation.
- **Trading Name and Address:** Where the company uses a name other than the above for trading purposes, this name should be annotated accordingly and the main base for training should also be detailed in Section 3 where different to the trading address.
- **Authorised Representative of the Company:** The Accountable Manager of the company may wish to delegate responsibility for the completion of application forms to another Director of the company or to the designated Head of Training. Details of the nominee should be completed and relevant correspondence verifying this agreement should be forwarded from the Accountable Manager
- **Additional Charges:** Where the cost of the CAA investigations exceeds the application charge payable, the applicant shall pay additional charges to recover those excess costs incurred by the CAA in accordance with the Scheme of Charges
- **Overseas Visits:** If a member or employee of the CAA is required to travel overseas in respect of this application you are advised to read the CAA Scheme of Charges to which this application relates and the section entitled 'additional charge where functions are performed abroad'. All expenses incurred in pursuance of this application by virtue of travelling overseas will be payable by the applicant on demand (www.caa.co.uk/ors5)
- **Withdrawal / Cancellation of Approval:** In the event that this application is withdrawn by the applicant, a cancellation charge may be levied. The cancellation charge reflects the work carried out by the CAA on behalf of the applicant up to the point of cancellation. Please see the CAA Refunds Policy at www.caa.co.uk/ors5 for more information. Where sufficient funds remain from the original application fee, this charge will be deducted from any refund made in respect of the application following cancellation.