APPLICATION FOR APPROVAL OF /OR AMENDMENT TO A TRAINING PROGRAMME FOR A DECLARED TRAINING ORGANISATION UK Aircrew Regulation Annex VIII - Part - DTO



Complete Section 2(b)

Complete Section 2(c)

Complete Section 2(c)

Air Navigation Order 2016

Submission instructions can be found at the end of the form.

Complete Section 2(a)

Complete Section 2(a)

Complete Section 2(a) unless a

FALSE REPRESENTATION STATEMENT

1. DECLARANT TYPE

Individual

Partnership

Private Clubs

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.

Charity

Trust

Ministry of Defence

	Limited Liability Partnership or Limited Company		
Limited Liability Partnership	Complete Section 2(b)	Public Educational Establishment	Complete Section 2(c)
Limited Company	Complete Section 2(b)	(University/College)	
2 DECLADANT DETAILS (Th	a Daalarant is the navaen reasons	sible for neumant of CAA charges)	
		sible for payment of CAA charges) priate, granted or issued to, the decl	arant(a) named below
a) Individual (including sole t		oriate, granted or issued to, the deci-	aranit(s) named below.
	ne:	Surname:	
Address:			
Telephone:		Mobile Telephone:	
E-mail:			
Trading Name: (if applicable)			
Website address:			
In the case of a partnership, ple	ease complete details of all partners.	Continued on a separate sheet	
in the sace of a parameterup, pre-	nace complete detaile of all parations.	Commission of a separate sheet	
This application will be cons Company Number provided of		oriate, granted to, the Company Nam	e as registered under the
b) A Company			
Registered Company Name (in	full):		
Registered Company Number:			
Country of Company Registrati	on:		
Registered Office Address:			
		Postcode:	
Telephone:			
E-mail:			
Trading Name: (if applicable)			
Trading Address (primary site):			
Country		Postcode:	
Website address:			

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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.					
Title: Forename:	Title: Surname: Surname:				
Position in Company:					
Telephone No: E-mail:					
This application will be considered in respect of	and, if appro	priate, granted or issued to, the declarant(s) named below.			
c) An Unincorporated Association or other be	ody				
Name of Unincorporated Association or other body:					
Address:					
Country:		Postcode:			
Telephone:					
· E-mail:		'			
·					
This application is to be signed by a person or persons authorised by the body named above to act on behalf of it. This should normally be a member or members of the managing committee of the association or other body. Evidence of the authorisation to act on behalf of the association or body should be provided with the application.					
Title: Forename:	Title: Forename: Surname:				
Position:					
Charity Number (if applicable):					
3. ADDRESS FOR CORRESPONDENCE (if different	ont from abou				
·		•			
rostal Address (il different from above)	•••••				
		Postcode:			
4. CAA REFERENCE NUMBER					
CAA Personal Reference/Training Organisation/ AOC No:					
5. TRAINING PROGRAMMES SUBMITTED FOR AI					
Course Name	Tick if required	Full Title of Training Program with document number and version date			
Aeroplanes					
Private Pilot Licence					
erobatics Rating					
Class Ratings (A)*(SEP, TMG etc)					
light Rating					
anner Towing Rating					

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Flight Instructor (NPPL(A) Microlights only)

Course Name	Tick if required	Full Title of Training Program with document number and version date
Helicopters		
Light Aircraft Pilot Licence		
Private Pilot Licence		
Night Rating		
Type Ratings (H)*		
Sailplanes		
Sailplane Pilot Licence		
TMG privileges		
Banner Towing Rating		
Night Rating		
Basic Instructor		
Flight Instruction		
Flight Instructor Refresher Course		
Flight Examiner Standardisation Course		
Flight Examiner Refresher Course		
Balloons		
Balloon Pilot Licence		
Class extension*		
Group extension*		
Night Rating		
Commercial non-Passenger		
Commercial Passenger		
Flight Instructor		
Flight Instructor Refresher Course		
Flight Examiner Standardisation Course		
Flight Examiner Refresher Course		
Gyroplanes		
Flight Instructor (Gyroplanes)		

Where any of the boxes indicated with * have been ticked, please indicate the courses offered in the space below.

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Course Name	Tickif required	Full Title of Training Program with document number and version date
Aeroplane Class Ratings		
SEP(Land)		
SEP(Sea)		
TMG		
Helicopter Type Ratings		
Bell 47		
Bell 47T		
Bell 206		
Bell 505		
Brantley B2		
SA 341/342		
EC120B Colibri		
Enstrom 28		
Enstrom 480		
Guimbal Cabri G2		
Hughes/Schweitzer 269		
Hughes/Schweitzer 330		
PZL SW-4		
R22		
R44		
R66		
Other		
Balloons		
Class - Hot-air		
Class - Gas		
Group A - hot-air balloons with maximum envelope capacity of 3400m³ Group B – hot-air balloons with an envelope capacity between 3401m³ and 6000m³		
Group C – hot-air balloons with an envelope capacity between 6001m³ and 10500m³ Group D – hot-air balloons with an envelope capacity of more than 10500m³		

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6. CHARGES
Where charges are to be paid other than by the declarant, please enter the name of the person/company who is paying:
If you want the CAA to quote a Purchase Order No. on your invoices, please provide the reference here:"
Purchase Order number:
IMPORTANT NOTES:
Additional Charges: Where the cost of the CAA investigations exceeds the application charge payable, the declarant 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 declarant on demand.
Withdrawal/Cancellation of Application: In the event that this application is withdrawn or cancelled by the declarant, the application fee less the cost of any work carried out by the CAA to that date, may be refunded. Please see the CAA Refunds Policy at www.caa.co.uk/ors5 for more information.
NB: This application will not be processed until the applicable charges have been received.

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	7. FINANCIAL DECLARATION					
	I am applying for an approval of or amendment to a Training Programme for a Declared Training Organisation.					
	I hereby declare that to the best of my knowledge the particulars entered on this application are accurate.					
	I agree to pay the charges for this application in accordance with the Scheme of Charges.					
	I agree to pay any additional charges which may become payable in respect of this application under the Scheme of					
	Charges. I agree to pay the charges payable on application in accordance with the Scheme of Charges (www.caa.co.uk/ors5.					
	Name of Declarant:					
	(as shown in 2 (a), (b) or (c))					
	Signature of Applicant (named in 2 (a), (b) or (c)):					
	or Signature of Authorised Representative (named in 2 (a), (b) or (c)):					
ı						

8. AGREEMENT TO RECEIVE ADDITIONAL INFORMATION (tick as appropriate)

I agree to receive:

Flight Crew Safety material from the CAA only

Safety material from authorised sources

9. APPLICATION FORM SUBMISSION SERVICE (SUBMIT & PAY)

Once you have completed your application form, please save a copy to your device. Click on the button below to submit your application, supporting documentation (if applicable) and to make payment by credit/debit card. 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.

Please note: Your application will not be processed until you have submitted it via the CAA Customer Portal and paid the relevant fee.

The charge(s) required will be calculated in accordance with the current CAA Scheme of charges <u>List of Official Record Series 5</u> - <u>Scheme of Charges (caa.co.uk)</u>

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.

Please note that a minimum of 60 working days will normally be required to check and confirm the information given above - if data is missing or omitted the process may take considerably longer.

CAA USE ONLY	Declarant's	name				Date of application
Department:			Con	tact Nam	ne:	
Job No:		Folio No:	CAA	Accoun	t Numbe	er:
Nominal Code:		Cost Centre:			[Date received
The sum of £	has	s been received l	by:			Date:
Amount paid by:	Card	В	ank Transfer*			
£		£				
* Receipt of Electronic Trans	fer to be verifie	ed by Treasury.				
Bank Account No:			Sort	Code:		
Is this part of a Company pay	ment?	Yes	No	If Ye	es - Total	amount paid:£
Amount to be deducted from	NATS account	t: £				
Enclosures:		FedEx p	oaid Yes/No Lo	oaded by	·:	Signed/Despatched:
Legal Entity Details						
Company – Date of incorpor						
If declaration is signed on be	nalf of a Compa	any:				
is declaration signed by a Director or Company Secretary?						
if not, then does signatory have authority to sign?						
Individual - Identification Document Details e.g. Passport/Driving Licence.						
Type of identification:						
Signature on ID checked agai	nst Form Signa	ture:			Appro	opriately certified:

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