



GOVERNMENT OF INDIA  
DIRECTORATE GENERAL OF CIVIL AVIATION

Form CA182 A

**Application for  
Approval of Indian Organization**

<b>1. Organization name and Address</b>			<b>2. Reasons for submission</b>	
a. Name			<input type="checkbox"/> Original application for grant of approval <input type="checkbox"/> Change in Scope of Approval <input type="checkbox"/> Change in Location or Housing and Facilities <input type="checkbox"/> Change in ownership <input type="checkbox"/> Other (specify)  	
b. Address for communication				
Phone:	Fax:	e-mail:		
c. Location for which approval sought				
<b>3. Name and designation of the Accountable Manager</b>				
<b>4. Category and Scope applied for</b>				
<b>Category (Please Specify) (A, B, C, D, E, F, G)</b>		<b>Scope</b>		
5. Details of fees remitted Rs _____			DD No.	Bank
6. Proposed Quality Control Manager (Attach bio-data)				
7. Proposed Dy Quality Control Manager (Attach bio-data)				
8. Release Note Signatory/ Test Report Signatory/ Chief Instructor (Attach bio-data)				
9. List of special equipment available (Attach list)			<input type="checkbox"/> Attached	<input type="checkbox"/> Not Attached
10. Quality Control Manual (in triplicate)			<input type="checkbox"/> Attached	<input type="checkbox"/> Not Attached
11. Engineering Organisation manual (in triplicate)			<input type="checkbox"/> Attached	<input type="checkbox"/> Not Attached
12. Maintenance System Manual (in triplicate)			<input type="checkbox"/> Attached	<input type="checkbox"/> Not Attached
13. Specimen copy of the 'Release Note', 'Certificate of Maintenance', 'Certificate of Manufacture' and 'Test report' in respect of manufacturer/ maintenance/ modification/ inspection/ testing/ repair etc.			<input type="checkbox"/> Attached	<input type="checkbox"/> Not Attached
14. List of the type/make of accessory(s) for which approval sought (in case of organisation seeking approval for maintenance/overhaul of accessory(s))			<input type="checkbox"/> Attached	<input type="checkbox"/> Not Attached
15. a. Number of employees (inclusive of production and inspection staff)				
b. Number of Licenced/approved personnel				
c. Number of Non-licenced personnel				
16. List of Maintenance Functions entrusted to sub-contractors (outside agencies) :				
I certify that my organization (referred to in item 1 above) fully complies with CAR Section 2, Series 'E' Part I and is fully competent to undertake the scope of work referred to above. I also certify that I have been authorized by the organization to make this application and that the statements and attachments hereto are true and correct to the best of my knowledge.				
Date	Authorised Signature	Name of the Authorised Signer	Title	

