

OTAR Part 145 Maintenance Organisation Approval



CIVIL AVIATION AUTHORITY
OF THE CAYMAN ISLANDS

Application: Type <i>Please tick*</i>		Initial		Renewal		Variation		Option 1	
Application Reference Renewal or Variation		Please enter Approval Reference: Expiry				Option 2			
Name of Maintenance Organisation and Mailing Address									
Address of Approved Facility									
Contact Details for Finance		Name: Position: Telephone: email:							
Principal Point of Contact		Name: Position Telephone: email:							
Current NAA Approval Reference		US FAA: TCCA: EASA: Other:							
Rating Applied For <i>For Option 1 please use this Section for any additional rating to that granted by your NAA. For Option 2, please record complete listing, if appropriate please refer to an attached document.</i>		Capability				Scope			
Documents to be submitted: <i>As applicable, please also submit electronic format wherever possible</i>		MOE/ Repair Station Manual			NAA Approval				
		Quality Assurance Manual			OTAR Part 145 Supplement				
		Operation Specifications							
Applicants Name: Position:									
Signature:									
Date:									