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| **Data protection:** Personal data included in this application is processed by EASA pursuant to Regulation (EU) 2018/1725 on the protection of natural persons with regard to the processing of personal data by the Union institutions, bodies, offices and agencies and on the free movement of such data, and repealing Regulation (EC) No 45/2001 and Decision No 1247/2002/EC. It will be processed solely for the purposes of the performance, management and follow‑up of the Application by the Agency, without prejudice to possible transmission to internal audit services, to the Court of Auditors, to the European Anti-Fraud Office (OLAF) for the purposes of safeguarding the financial interests of the European Union. The Applicant shall have the right of access to his/her personal data and the right to rectify any such data that is inaccurate or incomplete. To exercise the mentioned rights, you can contact the controller by sending an email to: Foreign147@easa.europa.eu. Should the Applicant consider that his/her data protection rights have been breached, he/she can always lodge a complaint with the EASA’s Data Protection Officer: dpo [at] easa.europa.eu. The Applicant shall have right of recourse at any time to the European Data Protection Supervisor (edps@edps.europa.eu).The Applicant can further consult how to exercise his/her rights on the privacy statement provided on EASA website: [www.easa.europa.eu/data-protection](http://www.easa.europa.eu/data-protection) |

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| **1. Your Reference** | Please provide a brief, unique identifier that we will use to refer to your application |

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| **2. Applicant Address and Contact Data** |
| **2.1 Applicant Data** |
| 2.1.1 Name and Address (registered (business) name and legal seat of the company) | EASA MTOA N° | **EASA.147.XXXX** |
| Account N° | if available, please enter your EASA Account number (e.g.3XXXXX) |
| (Company) Name |  |
| Trading Name | if different |
| Street / Nr |  |
| Post Code |  |
| City |  |
| Country |  |
| 2.1.2 Contact Person (responsible for this application) | Title | [ ]  Mr [ ]  Ms |
| Name |  |
| First name |  |
| Job title |  |
| Phone / Fax |  |
| Email |  |
| 2.1.3 (Proposed\*) Accountable Manager (\*The term “proposed” only remains applicable until the application has been approved.) | Title | [ ]  Mr [ ]  Ms |
| Name |  |
| First name |  |
| Job title / Position |  |
| Phone / Fax |  |
| Email |  |
| **Important Note:** An approval may be granted to an organisation which may be either a natural person, a legal entity or part of a legal entity. Would you therefore please include with this application confirmation of the legal status of your organisation and enclose a copy of your Certificate of Incorporation. |
| **2.2 Date of Certificate of Incorporation** | dd/mm/yyyy |

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| **2.3 Billing Data** (may be left blank, if same as 2.1 Applicant Data) |
| **2.3.1 Billing Address**(EASA Fees and Charges Invoices (EASA Fees and Charges Invoices will state the address entered here.) | (Company) Name | Same as in section 2.1.1 (other name only in exceptional cases) |
| Street / Nr |  |
| PO Box |  |
| Post Code |  |
| City |  |
| Country |  |
| 2.3.2 Contact Person(Responsible for ensuring the EASA terms of payment are honoured. The electronic invoice(s) will be issued to the email address indicated here.) | Title | [ ]  Mr [ ]  Ms |
| Name |  |
| First name |  |
| Job title |  |
| Phone / Fax |  |
| Email |  |
| **2.4 Shipping Data** (may be left blank, if same as 2.1 Applicant Data) |
| 2.4.1 Delivery Address(for the shipping of original EASA documents) | Company Name |  |
| Street / Nr |  |
| PO Box |  |
| Post Code |  |
| City |  |
| Country |  |
| **2.4.2 Contact Person** (shipping) | Title | [ ]  Mr [ ]  Ms |
| Name |  |
| First name |  |
| Job title |  |
| Phone / Fax |  |
| Email |  |

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| **2.5 Address(es) requiring approval** | *Reserved for EASA* |
| 2.5.1 Principle Location (please leave blank if same as 2.1.1) | (Company) Name |  |  |
| Trading Name |  |
| Street / Nr |  |
| Post Code |  |
| City |  |
| Country |  |
| Activities of this facility |  |

|  |  |  |  |
| --- | --- | --- | --- |
| 2.5.2 Additional Facility/Site 1 | Street / Nr |  |  |
| Post Code |  |
| City |  |
| Country |  |
| Activities of this facility |  |

|  |  |  |  |
| --- | --- | --- | --- |
| 2.5.3 Additional Facility/Site 2 | Street / Nr |  |  |
| Post Code |  |
| City |  |
| Country |  |
| Activities of this facility |  |

|  |  |  |  |
| --- | --- | --- | --- |
| 2.5.4 Additional Facility/Site n | Street / Nr |  |  |
| Post Code |  |
| City |  |
| Country |  |
| Activities of this facility |  |

[duplicate table as applicable]

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| **Total number of facilities under EASA approval** |  |  |

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| 3. Application Details |
| **3.1 Application Type** | **[ ]**  Application for initial grant |
| **[ ]**  **Application for change** |
|  | [ ]  Approval of additional course(s) [ ]  Removal of course(s)[ ]  Approval of additional facilities[ ]  Removal of facilities[ ]  Increase number of staff [ ]  Decrease number of staff [ ]  Change of Company name[ ]  Change of address[ ]  Change of Accountable Manager[ ]  Change of Management Personnel[ ]  Approval of MTOE procedure for off-site training course delivery[ ]  Approval of change (other than above): please describe |
| **3.2 Scope of Part-147 Approval relevant to this application** |  | *Reserved for EASA* |
|  |
| **3.3 Number of staff** Please count the number of staff employed by the organisation in order to comply with EASA Part-147 and the number of contracted staff associated with the proposed approval. |
|  | **Employees** | **Contractors** |
| **Main Facility** |  |  |
| **Additional Facility 1** |  |  |
| **Additional Facility 2** |  |  |
| **Additional Facility n** |  |  |

[add rows as applicable]

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| --- | --- | --- |
| **3.4 Total number of staff**  |  |  |

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| **3.5 Type Training Course(s) - List of training courses relevant to this application**Please consult the EASA website at http://easa.europa.eu/ > FAQ > Fees & Charges, for further information. |

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| --- | --- | --- |
| **Course #** | **Course Description** | Please enter: Airframe (engine) OR Airframe x (engine) vs. Airframe y (engine) OR engine type only, as applicable  |
| 01 |
| **Course Type** | **CAT** | **T/P** | **Action required** | *Reserved for EASA* |
| [ ]  Type training course  | [ ]  A | [ ]  B1 | [ ]  Theoretical | [ ]  Approval of Course |  |
| [ ]  Differences course | [ ]  Avionics only | [ ]  B2 | [ ]  B1 + B2 | [ ]  Practical | [ ]  Removal of Course |
| [ ]  Engine only | [ ]  Airframe only |  | [ ]  C | [ ]  Theoretical + Practical |  |

|  |  |  |
| --- | --- | --- |
| **Course #** | **Course Description** | Please enter: Airframe (engine) OR Airframe x (engine) vs. Airframe y (engine) OR engine type only, as applicable  |
| 02 |
| **Course Type** | **CAT** | **T/P** | **Action required** | *Reserved for EASA* |
| [ ]  Type training course  | [ ]  A | [ ]  B1 | [ ]  Theoretical | [ ]  Approval of Course |  |
| [ ]  Differences course | [ ]  Avionics only | [ ]  B2 | [ ]  B1 + B2 | [ ]  Practical | [ ]  Removal of Course |
| [ ]  Engine only | [ ]  Airframe only |  | [ ]  C | [ ]  Theoretical + Practical |  |

[duplicate table as applicable, for each training course one table has to be filled in]

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| **3.6 Basic Training Course(s) - List of training courses relevant to this application**Please consult the EASA website at http://easa.europa.eu/ > FAQ > Fees & Charges, for further information. |

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| --- | --- | --- | --- |
| **Course #** |  |  |  |
| 01 |
| **Course Type** | **CAT** | **Action required** | *Reserved for EASA* |
| [ ]  Basic Course  | [ ]  B1.1 (aeroplanes turbine) | [ ]  A1 | [ ]  B1.4 + B2 (combined) | [ ]  Approval of Course |  |
| [ ]  Bridging Course | [ ]  B1.2 (aeroplanes piston) | [ ]  A2 | [ ]  B1.3 + B2 (combined) | [ ]  Removal of Course |
|  | [ ]  B1.3 (helicopters turbine) | [ ]  A3 | [ ]  B1.1 + B1.2 (combined) |  |
|  | [ ]  B1.4 (helicopters piston) | [ ]  A4 | [ ]  B1.3 + B1.4 (combined) |  |
|  | [ ]  B1.1 vs. B1.2 (bridging) | [ ]  B2 (avionics) | [ ]  B1.1 + B2 (combined) |  |
|  | [ ]  B1.3 vs. B1.4 (bridging) | [ ]  B3 | [ ]  B1.2 + B2 (combined) |  |
|  | [ ]  Other: please describe |  |

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| --- | --- | --- | --- |
| **Course #** |  |  |  |
| 02 |
| **Course Type** | **CAT** | **Action required** | *Reserved for EASA* |
| [ ]  Basic Course  | [ ]  B1.1 (aeroplanes turbine) | [ ]  A1 | [ ]  B1.4 + B2 (combined) | [ ]  Approval of Course |  |
| [ ]  Bridging Course | [ ]  B1.2 (aeroplanes piston) | [ ]  A2 | [ ]  B1.3 + B2 (combined) | [ ]  Removal of Course |
|  | [ ]  B1.3 (helicopters turbine) | [ ]  A3 | [ ]  B1.1 + B1.2 (combined) |  |
|  | [ ]  B1.4 (helicopters piston) | [ ]  A4 | [ ]  B1.3 + B1.4 (combined) |  |
|  | [ ]  B1.1 vs. B1.2 (bridging) | [ ]  B2 (avionics) | [ ]  B1.1 + B2 (combined) |  |
|  | [ ]  B1.3 vs. B1.4 (bridging) | [ ]  B3 | [ ]  B1.2 + B2 (combined) |  |
|  | [ ]  Other: please describe |  |

[duplicate table as applicable, for each training course one table has to be filled in]

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| --- | --- | --- |
| **3.7 Total number of training course(s) to be approved** |  |  |

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| --- | --- | --- |
| **3.8 MTOE Off-site training/ examination procedure** Please consult the EASA website at http://easa.europa.eu/ > FAQ > Fees & Charges, for further information. | **[ ]** Yes **[ ]**  No |  |

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| **3.9 Does the organisation hold approval under Part 21 / Part 145 / Part M?** | **Part 21 Approval N°** | if applicable, EASA.21J.XXX |
| **Part 145 Approval N°** | if applicable, EASA.145.XXXX |
| **Part M Approval N°** | if applicable, EASA.MG.XXXX |

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| 4. Applicant’s declaration and acceptance of the Terms of Use for the EASA Inspection and Finding  Platform Service (IFP Service) |
| I, as Quality Manager of the Organisation, herewith declare to be duly authorised/empowered to validly represent the company as detailed above for the purpose of accessing and using the EASA Inspection and Finding Platform Service (IFP Service).I acknowledge that I have read, understood the Terms of Use of the IFP Service available on EASA CAO web page [[link to the EASA website](https://www.easa.europa.eu/sites/default/files/dfu/IFP%20Terms%20of%20use%20-%20Issue%202.pdf)] and I agree to abide by them.  |
| Enter date/location | Enter name |  |
| Date/Location | Name | Signature of Quality Manager |

|  |
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| 5. Applicant’s declaration and acceptance of the General Conditions and Terms of Payment |
| I declare that I have the legal capacity to submit this application to EASA and that all information provided in this application form is correct and complete.I have understood that I am submitting an application for which fees or charges will be levied by EASA in accordance with Commission Implementing Regulation (EU) on the fees and charges levied by the European Union Aviation Safety Agency, as last amended and available from <http://easa.europa.eu/> > Regulations > Fees & Charges.I acknowledge that I have read and understood the Agency’s Terms of Payment (see <http://easa.europa.eu/> > the Agency > FAQs > Downloads > Fees & Charges > Terms of Payment) and agree to abide by them. I declare to be aware that fees or charges, as well as all relevant travel costs must be paid whether or not the application is successful and that they might not be refundable. Moreover, I declare that I am aware of the consequences of non-payment. |
|  |  |  |
| Date/Location | Name of proposed\* Accountable Manager | Signature of proposed\* Accountable Manager |
| **Important Note:** EASA cannot accept applications without signature. Please make sure that you sign the application. |
| This Application should be sent by e-mail to:Foreign147@easa.europa.eu | **Completion Instructions**Please double-click on the icon to access the completion instructions. |