



Section/division: **PERSONNEL LICENSING**
 Telephone number: **011-082-1000**
 Physical address: **Hangar 50, Hurricane Road, Rand Airport, Germiston, 1401**
 Postal address: **Postnet suite 115, Private Bag X1037 Germiston 1400**

Form Number: CA 141-23
 Fax Number: **011-082-1020**
 Website: www.SACAA.co.za

DETAILS OF BANK ACCOUNT FOR PAYMENT OF PRESCRIBED FEE	
Bank: Standard Bank of SA Ltd	Branch: Pretoria Branch Code: 011245 Account Number: 013007971
COMPULSORY CLIENT PAYMENT CODE (to be completed on deposit slip)	
Service/transaction Fees: See CAR Part 187.00.10	Over the counter payments
	EFT, Internet, Wire, Electronic payments

APPLICATION FOR APPROVAL OF AVIATION TRAINING ORGANISATION

Please mark the applicable block:

<input type="checkbox"/>	APPLICATION FOR THE <u>TEMPORARY APPROVAL</u> BEFORE INITIAL ISSUE OF AN AVIATION TRAINING ORGANISATION
<input type="checkbox"/>	APPLICATION FOR THE <u>INITIAL ISSUE</u> OF AN AVIATION TRAINING ORGANISATION APPROVAL
<input type="checkbox"/>	APPLICATION FOR THE <u>AMENDMENT</u> OF AN AVIATION TRAINING ORGANISATION APPROVAL
<input type="checkbox"/>	APPLICATION FOR THE <u>RENEWAL</u> OF AN AVIATION TRAINING ORGANISATION APPROVAL
<input type="checkbox"/>	Aircraft Technical
<input type="checkbox"/>	Flight Operations
<input type="checkbox"/>	Air Traffic Services

- NOTES:**
- An application for the issuing of an aviation training organisation approval to conduct temporary aviation training, shall comply with the provision of CAR 141.03.1
 - An application for the issuing of an aviation training organisation approval to conduct standard aviation
 - Training, or amendment thereof, must comply with the provision of CAR 141.02.7.
 - An application for the renewal of an aviation training organisation approval to conduct standard aviation
 - Training, must comply with provisions of CAR 141.02.13.
 - Section 1 of this form must be completed in all cases.
 - All other sections must be completed if applicable to the specific application.
 - The original application must be submitted to the Director of Civil Aviation.
 - Where the required information cannot be furnished in the space provided, the information must be
 - Submitted as a separate memorandum and attached hereto.
 - Please delete if not applicable.

1. PARTICULARS REGARDING THE APPLICANT / HOLDER

Full name:					
Trade name:					
Full business / residential address:			Postal Address:		
	Code			Code	
Telephone number:			Fax number:		
Cellular number:			e-mail address:		
Legal status of applicant (<i>natural person / partnership / close corporation / company / organisation / other specify</i>)					
Registration number in the case of close corporation / company or trust					
Full particulars in respect of the individual/each director/shareholder/partner/member/office bearer					
Name	Position	ID number	Nationality	Country of permanent residence	

The applicant hereby declares that copies of all training materials and examinations will be made available to any South African Civil Aviation Authority inspector / auditor on request.			
The applicant declares hereby that the particulars provided in this application are true in every respect.			
SIGNATURE OF APPLICANT	NAME IN BLOCK LETTER	DATE	

APPLICATION FOR TEMPORARY APPROVAL BEFORE INITIAL ISSUE OF AN AVIATION TRAINING ORGANISATION

Type of standard aviation training applied for	
Supporting documents	

APPLICATION FOR INITIAL ISSUE OF AN AVIATION TRAINING ORGANISATION APPROVAL

Type of standard aviation training applied for	
Supporting documents	

APPLICATION FOR AMENDMENT OF AN AVIATION TRAINING ORGANISATION APPROVAL

Approval number		Expiry date	
Particulars of amendments applied for			
Supporting documents			

APPLICATION FOR RENEWAL OF AN AVIATION TRAINING ORGANISATION APPROVAL

Approval number		Expiry date	
Type of standard aviation training applied for			
Supporting documents: (Mark applicable block)			
	Proof of Payment		
	CA 141-27 for each aircraft to be added onto Operations Specifications together with page 3 of this application form needs to be filled in. (if aircraft are being added onto ATO)		
	Training Procedures Manual (for all initial applications)		
	CAA 141-30 Prospective ATO's pre-assessment statement (POPS) (for all initial applications)		

AIRCRAFT ON ATO											DATE OF EXPIRY			
	Registration	Type	Owner	AMO	Aircraft category	Lease agreement	No of seats	3 rd party liability	COR		Radio license	Release to service	ATF / CoA	W / B
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Category A4		Any aircraft, excluding a helicopter, with a maximum certificated mass of 2 700 kilograms or less												

OPERATORS			
Name			
Telephone number		e-mail address	
Fax number		Cellular number	
Postal address			
			Postal code

FEES AS PER CARS 187.00.16		
FOR OFFICIAL USE ONLY		
File reference		Proposed inspection date
SIGNATURE OF INSPECTOR	NAME IN BLOCK LETTER	DATE