



Section/division: Personnel Licensing, Aviation Safety Operations
 Telephone number: 011-082-1000 Fax Number: 011-082-1020
 Physical address: Ikhaya Lokundiza, 16 Treur Close, Waterfall Park, Bekker Street, Midrand, Gauteng
 Postal address: PostNet Suite #118, Private Bag, X1037, Germiston, 1400 Website: www.caa.co.za

Form Number: CA 66-05

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

Requirements for Renewal Complete Sections 1 & 2

1. Original form: CA 66-05
2. Applicable fee as per Part 187
3. Record of Experience (i.e. Logbook)
4. Summary of Experience per type and group

APPLICATION FOR THE RENEWAL OF AN APPROVED PERSON CERTIFICATE

SECTION 1 - TO BE COMPLETED FOR RENEWALS

AP Number			
Surname			
Name/s			
Telephone		Cell Phone	
Physical Address			
		Postal Code	
Postal Address			
		Postal Code	

NOTE: PLEASE REFER TO THE GUIDANCE SHEET ON PAGE 2 FOR COMPLETING THIS FORM.
EXPLANATORY NOTE:

1. In order to assist the applicant with providing the correct information and completing this form, SACAA has provided a guidance document in page 2 of this application for your convenience.
2. The guidance document will assist you by providing clarity how to complete the applicable sections of this form, and to leave areas not applicable to your application blank or mark with a NA.
3. Each section provides an area to summarise the applicant working experience in hours for easy reference in order to provide a faster and more efficient service to the applicant when processing and approving TAP applications.

Guidance Sheet	
Section 1	Requires applicant's details.
Section 2	Requires applicant to list at least 2 aircraft that they have performed inspections, maintenance, overhauls or repairs in the last 24 months.
Section 3	Requires applicant to provide a summary of experience for maintenance and/or inspections performed in the respective groups. i.e. A, B, C, or D as per the TAP certificate
3.2	Requires applicant to select airframe groups worked on and being renewed, and provide summary of experience for the previous two years. Indicate experience under maintenance or inspections as applicable.
3.3	Requires applicant to select engine groups worked on and being renewed, and provide summary of experience for the previous two years. Indicate experience under maintenance or inspections as applicable.
3.4	Requires applicant to provide experience of applicable to W ratings on TAP certificate. Provide in hours if applicable.
3.5	Requires applicant to provide experience of applicable to X ratings on TAP certificate. Provide in hours if applicable.
3.6	Requires applicant to provide experience of applicable to Welding ratings on TAP certificate. Provide in hours if applicable.
Classes of Certificates	
Regulation SACAR 66.04.14	
APC 1	Inspection certificate incl B, D & X ratings only, which do not include inspections on repair, or modification, work.
APC 2	Repair and maintenance certificate incl A, C & W ratings only, which includes inspections on repair, maintenance or modification work which has been done as well as carrying out such work.
APC 3	Restricted inspection certificate for airframes and/or engines, issued by type, excluding inspections on modifications and repairs.

Section 2 – To be completed for renewals			
Summary of experience for past 24 months (Requirement as per CAR 66.04.14(1)(a))			
Aircraft Reg.	Aircraft Type.	Owner/Operator	Work Performed

SECTION 3 – To be completed for renewals

Indicate which groups are being applied for.

Indicate in Hours (H) the total amount of experience obtained in groups applying for.

SECTION 3.1

Total summary of experience per category of aircraft		Maintenance experience in Hours	Inspection experience in Hours	For Office Use Only				
				V	S	I	A	N
a (i)	Aeroplane	hrs	hrs					
a (ii)	Microlight aeroplanes	hrs	hrs					
b	Helicopters	hrs	hrs					
c	Gyroplanes and gyrogliders	hrs	hrs					
d	Gliders, including power assisted and touring gliders	hrs	hrs					
e	Manned captive and manned free balloons	hrs	hrs					
f	Powered paragliders, paratrikes and powered hang-gliders	hrs	hrs					

SECTION 3.2

AIRFRAME GROUPS

Maintenance experience in Hours
APC1 APC2 APC3
B A

Inspection experience only.

For Office Use Only

V S I A N

LAST TWO YEARS EXPERIENCE IN HOURS
TOTAL EXPERIENCE IN HOURS

hrs	hrs	hrs	hrs
hrs	hrs	hrs	hrs

SECTION 3.3

ENGINE GROUPS

Maintenance experience in Hours
APC1 APC2 APC3
D C

Inspection experience only.

For Office Use Only

V S I A N

LAST TWO YEARS EXPERIENCE IN HOURS
TOTAL EXPERIENCE IN HOURS

hrs	hrs	hrs	hrs
hrs	hrs	hrs	hrs

SECTION 3.4

CATEGORY W

Maintenance experience in Hours
APC2 Only

Inspection experience only.

For Office Use Only

V S I A N

LAST TWO YEARS EXPERIENCE IN HOURS
TOTAL EXPERIENCE IN HOURS

hrs	hrs	hrs
hrs	hrs	hrs

SECTION 3.5

CATEGORY X	Maintenance experience in Hours			Inspection experience only, in Hours	For Office Use Only				
	APC1 Only	APC2	APC3		V	S	I	A	N
	LAST TWO YEARS EXPERIENCE IN HOURS	hrs			hrs				
TOTAL EXPERIENCE IN HOURS	hrs			hrs					

SECTION 3.6

WELDING	Summary of Experience				For Office Use Only				
	V	S	I	A	N				

I confirm that the information provided in this form is true, complete and accurate

SIGNATURE OF APPLICANT	NAME IN BLOCK LETTERS	DATE

FOR OFFICIAL USE ONLY

INSPECTOR RECOMMENDATION			
Name			
Date			
		Signature	

PROCESSING OF APPLICATION			
Name			
Date			
		Signature	

APPROVAL OF APPLICATION			
Name			
Date			
		Signature	