

Application for MRP Part 145 Approval

1. MRP Part 145 Approval Number	<i>Please enter your MAA approval number or enter N/A in case of initial application</i>	
2. Applicant Data		
2.1 Registered Name and Address <i>Legal name and seat of the company as it appears on the Business Registration or similar legal document</i>	Registered Name	
	Trading Name	
	Street	
	Town/City	
	Post Code	
	Country	
<p>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.</p>		
2.2 Date of Certificate of Incorporation		
		Country
3. Address of site(s) requiring approval		
3.1 Principal place of business <i>(may be left blank, if same as 2.1 Applicant Data)</i>	Street	
	Town/City	
	Post Code	
	Country	



3.2 Base, Engine and Component Maintenance Site(s) <i>Enter "Not applicable" in the case the Maintenance Site is the same as 3.1</i>		
3.2.1 Facility/Site 1	Street	
	Town/City	
	Post Code	
	Country	
3.2.2 Facility/Site 2	Street	
	Town/City	
	Post Code	
	Country	

[For additional Facilities/Sites, see Section 3.2 Continuation Sheet]

Continuation sheet used

Sheets used

4.3 Line Maintenance Location(s) <i>Enter "Not applicable" in the case the Maintenance Site is the same as 3.1 Place of Business</i>		
4.3.1 Facility/Site 1	Street	
	Town/City	
	Post Code	
	Country	
4.3.2 Facility/Site 2	Street	
	Town/City	
	Post Code	
	Country	

[For additional Facilities/Sites, see Section 3.2 Continuation Sheet]

Continuation sheet used

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5. Contacts		
5.1 Accountable Manager (AM)	Title	
	Name	<i>Enter the name of the proposed AM in the case of a new Part-145 or in case of change of AM</i>
	First name	
	Job title/Position	
	Phone/Fax	
	Email	
5.2. Quality Manager	Title	
	Name	
	First name	
	Job title/Position	
	Phone/Fax	
	Email	
5.3. Organisation Generic Email		<i>This address will be used for all technical communication associated with this application</i>

6. Identification of Activity	<i>Enter details of applicable Facility/Site</i>	
6.1 Application for <i>Tick boxes as required</i>	<input type="checkbox"/> Part-145 Approval	<input type="checkbox"/> Part-145 (Supplement) Approval
6.2 Application Type <i>Tick boxes as required</i>	<input type="checkbox"/> Initial Application	
	<input type="checkbox"/> Change to the Approval	
	Detail of change <input type="checkbox"/> Organisation name <input type="checkbox"/> Address data <input type="checkbox"/> Nominated persons <input type="checkbox"/> MOE	<input type="checkbox"/> Rating(s) <input type="checkbox"/> Contact detail(s)
6.3 Details of the application	<i>Enter details of the application, change or notification annotated in 6.2, to include details of the amended Exposition reference and issue state.</i>	

7. Scope of requested Part-145 Approval <i>Tick boxes as required</i>		LIMITATION	BASE		LINE	
			Yes	No	Yes	No
			RATING			
A1 Aeroplanes/airships above 5700 Kg		<i>Will state aeroplane manufacturer or mark or type and/or the maintenance task(s)</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A2 Aeroplanes/airships 5700 Kg and below			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A3 Helicopters			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A4 Aircraft other than A1, A2 or A3			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B1 Turbine		<i>Quote the expected engine type(s) to be added and/or deleted as defined in the engine TCDS</i>				
B2 Piston		<i>Quote state engine manufacturer or series or type and/or the maintenance task(s)</i>				
B3 APU		<i>Quote the expected APU type(s) to be added and/or deleted as defined by the OEM</i>				
C1 Air Cond & Press	<input type="checkbox"/>	<i>State aircraft type or aircraft manufacturer or component manufacturer or the particular component and/or the maintenance task(s) and/or cross refer to a capability list in the exposition</i>				
C2 Auto Flight	<input type="checkbox"/>					
C3 Comms and Nav	<input type="checkbox"/>					
C4 Doors - Hatches	<input type="checkbox"/>					
C5 Electrical Power	<input type="checkbox"/>					
C6 Equipment	<input type="checkbox"/>					
C7 Engine - APU	<input type="checkbox"/>					
C8 Flight Controls	<input type="checkbox"/>					
C9 Fuel - Airframe	<input type="checkbox"/>					
C10 Helicopter - Rotors	<input type="checkbox"/>					
C11 Helicopter - Transmission	<input type="checkbox"/>					
C12 Hydraulic	<input type="checkbox"/>					
C13 Instruments	<input type="checkbox"/>					
C14 Landing Gear	<input type="checkbox"/>					
C15 Oxygen	<input type="checkbox"/>					
C16 Propellers	<input type="checkbox"/>					

	C17 Pneumatic	<input type="checkbox"/>		
	C18 Protection ice/rain/fire	<input type="checkbox"/>		
	C19 Windows	<input type="checkbox"/>		
	C20 Structural	<input type="checkbox"/>		
	C21 Water Ballast	<input type="checkbox"/>		
	C22 Propulsion Augmentation	<input type="checkbox"/>		
	C51 Attack Systems	<input type="checkbox"/>		
	C52 Radar/Surveillance	<input type="checkbox"/>		
	C53 Weapons Systems	<input type="checkbox"/>		
	C54 Crew Escape	<input type="checkbox"/>		
	C55 Missiles/Drones/Telemetry	<input type="checkbox"/>		
	C56 Reconnaissance	<input type="checkbox"/>		
	C57 Electronic Warfare	<input type="checkbox"/>		
SPECIALISED SERVICES	D1 Non- Destructive Testing	<input type="checkbox"/>	Eddy Current Inspection	
		<input type="checkbox"/>	Liquid Penetrant Inspection	
		<input type="checkbox"/>	Magnetic Particle Inspection	
		<input type="checkbox"/>	Radiography Inspection	
		<input type="checkbox"/>	Shearography Inspection	
		<input type="checkbox"/>	Thermography Inspection	
		<input type="checkbox"/>	Ultrasonic Inspection	
		<input type="checkbox"/>	Other Method	<i>State particular NDT Method</i>
OTHER SPECIALIST SERVICES				

[For additional Part-145 Approval scope, see Section 7 Continuation Sheet]

Continuation sheet used

Sheets used

8. Other approvals held by the applicant			
MRP Pt 145 Approval(s)		EASA Pt 145 Approval(s)	
9. Applicant's declaration and acceptance of the General Conditions and Terms of Payment			
<p>I declare that I have the legal capacity to submit this application to the MAA and that all information provided in this application form is correct and complete.</p> <p>I have understood that I am submitting an application for which fees or charges will be levied by the MAA or its representative.</p> <p>I declare 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.</p> <p>Noting that failure to pay may mean that an organization approved under MRP Part 145 could have their certification withdrawn</p>			
Date	Name	Signature of Accountable Manager*	
<p>*Important note: The MAA does not accept applications without signature. The signature of either the AM or of the new proposed AM (in case of initial Approval or in case of changed AM) is always required.</p>			
<p>On completion, please send this form to:</p> <p>Military Aviation Authority Assurance Co-ordination Cell, Operating Assurance Group, #5104, Juniper 1, Wing 4, MOD Abbeywood (North), Bristol, BS34 8QW</p> <p>E-mail: DSA-MAA-OA-ACC@mod.gov.uk</p>			