

MAA REGULATORY ALTERNATIVE ACCEPTABLE MEANS OF COMPLIANCE, WAIVER OR EXEMPTION APPLICATION FORM

Completion of this form should be done in reference to MAA03 Annex B. Attachments may be included in lieu of full completion of individual sections but in doing so you should make cross reference to Section 8 where you can provide full attachment details.

Once completed, this AWE¹ application and supporting attachments are to be sent to the MAA Regulatory Publications Team (MRPT), by email to DSA-MAA-MRPEnquiries@mod.gov.uk.

1	Originator Name:	
	Post / Position:	
	Unit / Organisation:	
	E-mail:	
	Telephone:	
	Your reference(s):	

2	The person to whom the MAA's response should be addressed to:	Name:	
		Post / Position:	
		Unit / Organisation:	
		E-mail:	

3	Application Type:	Please tick as appropriate:	<input type="checkbox"/> AAMC	<input type="checkbox"/> Waiver	<input type="checkbox"/> Exemption
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¹ For clarification the abbreviation AAMC refers to Alternative Acceptable Means of Compliance; the abbreviation AWE refers to AAMCs, Waivers and Exemptions.

4	MAA Regulation Affected:	RA Number – Title – Issue Number – Regulation – AMC Quote verbatim the regulation and / or AMC which is the subject of this AWE
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5	Proposal Text:	<p>For AAMC submissions the proposal text for the AAMC should be in the same format as an AMC (ie a short statement in the format: "The (responsible person or organization) should (take this action)").</p> <p>For Waiver and Exemption submissions if the proposal would permit a deviation from:</p> <p style="padding-left: 40px;">(1) Regulation. The proposal text should be in the same format as a Regulation (ie a short statement in the format: "The (responsible person or organization) shall (achieve the desired effect)."</p> <p style="padding-left: 40px;">(2) AMC. The proposal text should be in the same format as an AMC (ie a short statement in the format: "The (responsible person or organization) should (take this action)").</p> <p>NB. Waivers are time bound with an intention for eventual compliance with the RA whilst Exemptions are for the remaining life of the Air System or identified RA non-compliance.</p>	
		Date required until (Waivers only):	

6	<p>Safety Assessment:</p>	<p>The Safety Assessment must include the information as detailed in MAA03 Annex B paragraph 6g.</p> <p>Check list:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Contains the justification for the AWE. <input type="checkbox"/> Details of any relevant AWEs (extant, expired, rejected or other). <input type="checkbox"/> The RA(s) or other documentation that causes difficulty for compliance and a description of why the application for an AWE is sensible. <input type="checkbox"/> A detailed Risk assessment and appropriate detailed Risk mitigation. <input type="checkbox"/> Appropriate supporting comments of the associated / mitigated Risk(s) as ALARP and tolerable. <input type="checkbox"/> A statement of acceptance from all applicable ADHs / AM(MF)s (when the AWE is not submitted by an ADH / AM(MF)).
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7	Promulgation and Control:	Explain how the AWE activities will be promulgated as a process to supersede the Regulation / AMC. This should include any monitoring and control of the AWE's intended processes.
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8	Attachments:	<p>Where the application refers to non-MRP documentation, detail the documents including any appropriate issue number / amendment state in the box below and ensure copies are attached to the AWE application email or letter.</p>	
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AWE APPLICATION AND SAFETY ASSESSMENT ENDORSEMENT

The AWE application and its safety assessment is to be endorsed by the individuals responsible:

Type Airworthiness-related. This should be Type Airworthiness Authority (with an appropriate Letter of Airworthiness Authority) or the Type Airworthiness Manager (with an appropriate Letter of Appointment).

Continuing Airworthiness-related. This should be the Military Continuing Airworthiness Manager.

For all other subjects. The application for an AWE must be specifically approved by the person responsible for ensuring that the task, that is the subject of the AWE, is undertaken.

AAMC Declaration	<p>I have considered this application in full and declare that the AAMC proposed meets, as a minimum, the same level of Air Safety Risk to Life as provided by the original Regulation / AMC.</p> <p style="text-align: right;"><input type="checkbox"/> Tick this box if applying for an AAMC</p>
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Waiver / Exemption Declaration	<p>I have considered this application in full and declare that the associated / mitigated Risk(s) of the proposed Waiver / Exemption are As Low As Reasonably Practicable (ALARP) and Tolerable.</p> <p>The Risk holder(s) have been positively identified as (by post details, see section 10 for guidance):</p> <table border="1" style="width: 100%; height: 100px;"> <tr><td> </td></tr> <tr><td> </td></tr> <tr><td> </td></tr> <tr><td> </td></tr> <tr><td> </td></tr> </table> <p style="text-align: right;"><input type="checkbox"/> Tick this box if applying for a Waiver or Exemption</p>					

Name:		Date:	
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Post / Position:	
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Email:	
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Signature:	
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10	WAIVER / EXEMPTION RISK ACCEPTANCE		
<p>For Waiver and Exemption applications there will be an increased Risk that must be accepted and held by the appropriate individual(s). The appropriate Risk holder(s) will be identified within the safety assessment and listed within Section 9 AWE Application and Safety Assessment Endorsement.</p> <p>For guidance, consideration of the Risk holder will be dependent upon whether the Risk is Type Airworthiness-related, Continuing Airworthiness-related or Operating Environment-related:</p> <p>Type Airworthiness-related. Consideration should include Operating Centre Director and / or Sponsor along with the appropriate Delivery Duty Holder and / or Accountable Manager (Military Flying).</p> <p>Continuing Airworthiness-related. Consideration should include Accountable Manager (Maintenance) along with the appropriate Delivery Duty Holder and / or Accountable Manager (Military Flying).</p> <p>Operating Environment-related. Consideration should include the Aviation Duty Holder(s) (ADH) and / or Accountable Manager (Military Flying), Head of Establishment for Risks in providing a Safe Operating Environment and Heads of relevant ADH-Facing Organizations for Risks in providing aviation support and / or facilities.</p>			
Declaration		I have considered this application in full and agree and accept the associated / mitigated Risk(s), as detailed within safety assessment, as being As Low As Reasonably Practicable (ALARP) and Tolerable.	
Name:		Date:	
Post / Position:			
Email:			
Signature:			
Declaration		I have considered this application in full and agree and accept the associated / mitigated Risk(s), as detailed within safety assessment, as being As Low As Reasonably Practicable (ALARP) and Tolerable.	
Name:		Date:	
Post / Position:			
Email:			
Signature:			

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