

MAA Part 145 Form 2

Application for MRP Part 145 Approval						
1. MRP Part 145 Approval Number	Please enter your MAA Approval number or enter N/A in case of initial application					
2. Applicant Data						
2.1 Registered Name and Address Legal	Registered Name					
name and seat of the	Trading Name					
company as it appears on the Business Registration or similar legal document	Street					
	Town / City					
	Post Code					
	Country					
Important Note: An Approval may be granted to an organization 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 organization and enclose a copy of your Certificate of Incorporation.						
2.2 Date of Certificate of	Incorporation					
		Country				
3. Address of site(s) requiring Approval						
3.1 Principal place of	Street					
business (may be left	Town / City					
blank, if same as 2.1 Applicant Data)	Post Code					
Apprount Data)	Country					



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3.2.1 Facility / Site 1	Street	
	Town / City	
	Post Code	
	Country	
3.2.2 Facility / Site 2	Street	
	Town / City	
	Post Code	
3.3 Line Maintenance	Country S / Sites, see Section 3.2 Continuation Location(s) Enter "Not applicable	Sheets used
3.3 Line Maintenance Principal Place of Busin	ocation(s) Enter "Not applicable	Sheets used
3.3 Line Maintenance Principal Place of Busin	Location(s) Enter "Not applicable ess	Sheets used
	cocation(s) Enter "Not applicable ess Street Town / City	Sheets used
3.3 Line Maintenance Principal Place of Busin	Solves, see Section 3.2 Continues of Sites, see Section 3.2 Contin	
3.3 Line Maintenance Principal Place of Busin 3.3.1 Facility / Site 1	cocation(s) Enter "Not applicable ess Street Town / City	Sheets used
3.3 Line Maintenance Principal Place of Busin 3.3.1 Facility / Site 1	S / Sites, see Section 3.2 Continues / Sites, see S	Sheets used
3.3 Line Maintenance Principal Place of Busin	Solves, see Section 3.2 Continues of Sites, see Section 3.2 Contin	Sheets used



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4. Contacts					
4.1 Accountable	Title				
Manager (AM)	Name				
		Enter the name of the proposed AM in the case of a new Part 145 or in case of change of AM			
	First name				
	Job title / Position				
	Phone / Fax				
	Email				
4.2. Quality Manager	Title				
	Name				
	First name				
	Job title / Position				
	Phone / Fax				
	Email				
4.3. Organization Generic Email					
		This address will be used for all technical communication associated with this application			



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5. Identification of Activity	Enter details of applicable Facility / Site						
5.1 Application for Select as required	Part 145 Approval	Part 145 (Supplement) Approval					
5.2 Application Type Select as required	☐ Initial Application ☐ Change to the Approval						
	Detail of change Organization name Address data Nominated persons Maintenance Organization Exposition	☐ Rating(s) ☐ Contact detail(s)					
5.3 Details of the application	Notification of surrender Enter details of the application, change or notification annotated in 5.2, to include details of the amended Exposition reference and issue state.						



6. Sc	ope of requested Part 14	15 Ap	proval Select as required						
	Rating		Limitation		Base		Line		
				Yes	No	Yes	No		
	A1 Aeroplanes / airships above 5700) Kg	Enter Aircraft manufacturer or series or type and / or the Maintenance task(s)						
	A2 Aeroplanes / airships 5700 Kg and below A3 Helicopters A4 Air System other than A1, A2 or A3. This rating to be used for all Uncrewed Air Systems (UAS)		Enter Aircraft manufacturer or series or type and / or the Maintenance task(s)						
			Enter Aircraft manufacturer or series or type and / or the Maintenance task(s)						
			Enter Air System manufacturer or series or type and / or the Maintenance task(s)						
	B1 Turbine B2 Piston B3 Auxiliary Power Unit (APU)		Enter the expected engine type(s) to be added and / or deleted as defined in the engine Type Certificate Data Sheets (TCDS)						
			Enter engine manufacturer or series or type and / or the Maintenance task(s)						
			Enter the expected APU type(s) to be added and / or deleted as defined by the Original Equipment Manufacturer (OEM)						
	C2 Auto Flight								
	C3 Comms and Nav		Enter Aircraft type or Aircraft manufacturer or component manufacturer or the specific component and / or the Maintenance task(s) and / or cross refer to a capability list in the Exposition						
	C4 Doors - Hatches								
	C5 Electrical Power and Lights								
	C6 Equipment								
	C7 Engine - APU								
	C8 Flight Controls								
	C9 Fuel - Airframe C10 Helicopter - Rotors C11 Helicopter - Transmission								
	C12 Hydraulic								
	C13 Indicating / Recording Systems								
	C14 Landing Gear								
	C15 Oxygen								
	C16 Propellers								



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Air Safety Information when completed

	C17 Pneumatic and Vacuum			
	C18 Protection ice / rain / fire			
	C19 Windows			
	C20 Structural			
	C21 Water Ballast			
	C22 Propulsion Augmentation			
	C51 Attack Systems			
	C52 Radar / Surveillance			
	C53 Weapons Systems			
	C54 Crew Escape			
	C55 Missiles / Drones / Telemetry			
	C56 Reconnaissance			
	C57 Electronic Warfare			
	D1		Eddy Current Inspection	
	Non- Destructive Testing		Liquid Penetrant Inspection	
·o			Magnetic Particle Inspection	
Specialised Services			Radiography Inspection	
l Ser			Shearography Inspection	
lisec			Thermography Inspection	
ecia			Ultrasonic Inspection	
S			Other Method	
				Enter specific Non-Destructive Testing (NDT) Method
Other Specialist Services				

[For additional Part 145 Approval scope, see Section 6 Continuation Sheet] Continuation sheet used
Sheets used



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Air Safety Information when completed

7. Other Approvals held by the applicant						
MRP Part 145 Approval(s)		EASA Part 145 Approval(s)				

8. 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 the MAA 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 the MAA or its representative.

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.

Noting that failure to pay may mean that an organization approved under MRP Part 145 could have their Approval withdrawn.

Date	Name	Signature of Accountable Manager*

^{*}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.

On completion, please send this form to:

Military Aviation Authority

Assurance Co-ordination Cell, Operating Assurance Group, #5104, Juniper 1, Wing 4, MOD Abbeywood (North), Bristol, BS34 8QW

E-mail: DSA-MAA-OA-ACC@mod.gov.uk