

MAA Regulatory Air Safety 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 <u>DSA-MAA-MRPEnquiries@mod.gov.uk</u>.

Section 1 (Originator Details)

Originator Name:	
Post / Position:	
Unit / Organization:	
E-mail:	
Telephone:	
Your reference(s):	
Section 2 (The person	to whom the MAA's response should be addressed to)
Name:	
Post / Position:	
Unit / Organization:	
E-mail:	

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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.



Section 3 (Application Type)	
(Tick as appropriate)	□ AAMC □ Waiver □ Exemption
Section 4 (MAA Regul	ation 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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Section 5 (Proposal Text)

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For AAMC submissions, the proposal text for the AAMC in the same format as an AMC (ie a short statement in the format: "The (responsible person or organization) should (take this action)").
For Waiver and Exemption submissions, the Regulation / AMC text that cannot be complied with and the solution the EP Waiver / EP Exemption submission is proposing.
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. Thus Waivers require a validity period.
Date required until (Waivers only):

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Section 6 (Safety Assessment)

The Safety Assessment must include:
☐ Justification for the AWE.
\square Details of any relevant AWEs (extant, expired, rejected or other).
\square A detailed Risk Assessment and appropriately detailed Risk mitigation.
□ Appropriate supporting comments annotated as references. Historical evidence is useful, but only as support to the Risk mitigation plans. Note: AAMCs will have no increase in the RtL. Waivers and Exemptions may have an increase in the RtL, and thus the supporting comments must include acceptance of the associated / mitigated Risk(s), as being As Low As Reasonably Practicable (ALARP) by the person responsible for ensuring that the task, that is the subject of the AWE, is undertaken and have ensured the ADH / AM(MF)² accepts the associated / mitigated Risk(s) as Tolerable.
☐ When the AWE is not submitted by an ADH / AM(MF), a statement of acceptance from all applicable ADHs / AM(MF)s is required. For Head of Establishment (HoE) submissions related to the provision of a Safe Operating Environment (SOE), a statement of confirmation that a SOE remains is required from the HoE.

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 $^{^2 \} Collectively \ "ADH-Facing \ Organization" \ and \ "AM(MF)-Facing \ Organization" \ is \ abbreviated \ to \ "AA-Facing \ Organization".$



Section 7 (Promulgation and Control)

A brief description of where and how the AWE activities will be promulgated. This must explain how the chosen method of promulgation will ensure that all affected, or potentially affected, stakeholders will be informed of the AWE. This should include any monitoring and control of the AWE's intended processes.

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Section 8 (Attachments)

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.	

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Section 9 (Air Safety AWE Application and Safety Assessment Endorsement)

The AWE application and its Safety Assessment must be endorsed by the individuals responsible:

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

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

For all other subjects. This should be specifically approved by the person responsible for ensuring that the task, that is the subject of the AWE, is undertaken.

AAMC Declaration	I have considered this application in full and declare that the AAMC proposed meets, as a minimum, the same level of Air Safety as provided by the original Regulation / AMC. — Tick this box if applying for an AAMC
Waiver / Exemption Declaration	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.
	☐ Tick this box if applying for a Waiver or Exemption
	The Risk holder(s) have been positively identified as (by post details, see section 10 for guidance):
Name:	
Date:	
Post / Position:	
Email:	
Signature:	

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Section 10 (Air Safety Waiver / Air Safety Exemption Risk Acceptance)

Waiver and Exemption applications where there is an increased RtL, the increased RtL 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.

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:

Type Airworthiness-related. Consideration should include Operating Centre Director and / or Sponsor along with the appropriate Delivery Duty Holder (DDH) and / or Accountable Manager (Military Flying).

Continuing Airworthiness-related. Consideration should include Accountable Manager (Maintenance) along with the appropriate DDH and / or Accountable Manager (Military Flying).

Operating Environment-related. Consideration should include the HoE for Risks in providing a SOE, Heads of relevant AA-Facing Organizations for Risks in providing aviation support and / or facilities, and ADHs and / or AM(MF)s where there is an increased RtL.

Declaration	I have considered this application in full and agree and accept the associated / mitigated Risk(s), as detailed within Safety Assessment, as being 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 ALARP and Tolerable.
Name:	
Date:	
Post / Position:	

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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 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 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 ALARP and Tolerable.
Name:	
Date:	

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Post / Position:	
Email:	
Signature:	

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