



**APPLICATION FORM FOR APPROVAL OF AN ORGANIZATION
EXPOSITION
Airworthiness and Registry Department**

Барање за одобрување на организациски прирачник
Application form for approval of an organization exposition

Note 1: In paper form, this application is submitted directly or sent by mail to the address indicated in the header

Note 2: Together with the application, please submit paid fee according to the tariff and administrative fee

Please fill all the necessary data:

APPLICANT	
Registered name of applicant:	
Trading name (if different):	
Address	
Tel. Fax	
E-mail	

1. Issue (revision) and date of issue of the exposition:		
Issue:	Revision:	Date:
2. The Exposition is in accordance with:	<input type="checkbox"/> Part 145	<input type="checkbox"/> Part CAMO
	<input type="checkbox"/> Part CAO	<input type="checkbox"/> Part 147
3. Attached to this application is:		
<input type="checkbox"/> A copy of the Exposition in paper or digital form.		
<input type="checkbox"/> List of compliance in case of initial or new issue.		
<input type="checkbox"/> Nomination letter, CV, relevant certificates, letters of recommendation/confirmation from previous employers, etc. for the purpose of accepting nominated persons and persons for airworthiness review.		
<input type="checkbox"/> CV and relevant certificates of persons in CAMO's subcontractor organization upon initial approval and change related to the subcontractor.		
<input type="checkbox"/> Risk assessment for changes for which approval is requested in Part CAMO and Part 145 organization.		
<input type="checkbox"/> Pre-audit at initial certificate issuance.		



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<p><input type="checkbox"/> "OJT logbook" in case of requesting approval of the procedure for OJT.</p> <p><input type="checkbox"/> "TNA" analysis in case of requesting approval of theoretical training (Part 147).</p> <p><input type="checkbox"/> "Practical training logbook" in case of requesting approval of practical training (Part 147).</p>			
4. Date:	5. Name and surname of the applicant:	6. Signature:	7. Position: