# ISO 9001: 2015 CERTIFIED

### **Civil Aviation Authority of Fiji**

## Application for Aircraft Maintenance Engineer's Licence (Issue)

Form PL 103J

SURNAME:(BLOCK CAPITALS)		(i) Date of Birth:			
OTHER NAMES:		(ii) Nationality:			
PERMANENT ADDRESS:			TELEPHONE NO:		
ADDRESS FOR USE WIT					
		•••			
Name of Employer:		Dat	te of Joining:		
Employed at:		Telephone No:			
1 Give details of ALL a Licence during the la	pplications made for the gra st two years.	int or exte	ension of a Fiji Aircraft	Maintenance Engineer's	
Approximate date	Category and/or ratings	Was a	oplication accepted?	Results of examination	
2. Particulars of Fiji Ai	ircraft Maintenance Enginee	r's Liceno	ce.		
Licence No:		Issue d	ate:		
CAAF Aeronautical	Maintenance Certificate hel	ld:			
3. Fill in below details of Aircraft Maintena		h to mak	e application (see the c	current issue of SD – Licensing	
Licence	Category		Sub division/type ratir	ng being applied for	
WITHOUT TYPE RATING					
TYPE RATING					
4. I wish to take my w	ritten/oral examination at				

#### **FOR CAAF USE ONLY**

Examiners Signature: Exemptions: Written: Exam Venue: AMC'S: Expires: Oral: Fee: \$ Rating:

Receipt No: CAAF (TRROE) to be vetted by:

Satisfactory/Unsatisfactory

5. State in date order full particulars of experience (including service in Armed Forces, if applicable) together with any practical experience gained as a student at any aeronautical school or college. Please indicate whether experience was obtained in full-time or part-time involvement. If part-time quote approximate hours worked per week.

IMPORTANT: The application will not be accepted unless (i) the information required is given in sufficient detail to clearly show satisfaction with any experience requirement in the current issue of SD – Licensing of Aircraft Maintenance Engineers for the category of licence for which application is made, (ii) the conditions of Column (4) are complied with, and (iii) a satisfactory Type Rating Record of Experience is submitted if applicable.

#### NOTES:

- 1. If the application is for an extension within a Category, particulars of relevant experience are required ONLY since the date of the last application for the Category, together with Type Rating Record of Experience on the type to which the application relates.
- 2. The Type Rating Record of Experience should be compiled in accordance with Appendix 2 & 4 of SD Licensing of Aircraft Maintenance Engineers.
- 3. The signature in Column (4) constitutes confirmation of adjacent entry in Columns (1), (2), (3).
- 4. For Type Rating Record of Experience, Column 1 should reflect the registration of aircraft.

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Type of Aircraft, Engine or Equipment, showing the particulars relevant to the application being	PRECISE NATURE of work, and name of person in charge of Department or in similar authoritative position.  State name of employer and place of employment.	DATES From To	Signature of Referee and name in capitals. To be signed by person quoted in Column (2). (See
	(2)	(3)	(4)
the particulars relevant to the application being made.  (1)	State name of employer and place of employment.		Notes above.)

6.	Have you studied the following current publications?				
	The current Air Navigation Regulations CAP 174:				
	Standard Documents:				
	UK CAA Airworthiness Notices:				
	Aeronautical Information Circulars				
7.	Have you had Human Performance Training and examination by your ANR145C Aircraft Maintenance Organization?				
	If you answered Yes, attach evidence or course certificate.				
8.	Are you the holder of any Aircraft Maintenance Engineer's Licence issued by an authority OTHER THAN THE CAAF?				
	If so, state:				
	(i) Issuing authority				
	(ii) Licence Number				
	(iii) Date of expiry				
9. I he	I hereby declare that the information given on this form is true in every respect.				
	SIGNATURE OF APPLICANT				
	DATE				
10.	This section is required to be completed only when an application is made for a Type Rating.				
	I hereby certify that I am not aware of any reason why				
	should not be granted a Type Rating in respect of Category				
	Signed: Date:				
	Position or Status:				
	Licence No.:				
	This certification shall normally be made by an engineer who has regular professional contact with the application and who has held a Fiji Licence in the discipline for which application is made, for a minimum period of months. The licence must be valid. The signatory may be an experienced person other than an appropriat				

nt 24 ly licensed engineer with the prior agreement of the CAAF Surveyor.

#### **IMPORTANT NOTES:**

- When completed, this form and relevant Type Rating Record of Experience if applicable should be returned to the Licensing Officer, Civil Aviation Authority of Fiji, Nadi Airport, Fiji. (1) This application is valid for 6 months only.
- Requests to amend this application subsequent to its receipt by the CAAF will not be accepted. (2)