



ESWATINI CIVIL AVIATION AUTHORITY

FORM: AC-AWS006B

April 2020

**APPLICATION FOR APPROVED MAINTENANCE ORGANIZATION
CERTIFICATE AND RATINGS AND RENEWAL**

1. Maintenance Organization Name, Number, Location and Address		2. Reasons for Submission	
a. Official Name of Maintenance Organization:	Number:	<input type="checkbox"/> Application for AMO Certificate and Rating Issue <input type="checkbox"/> Change in Rating <input type="checkbox"/> Change in Location or Housing and Facilities <input type="checkbox"/> Change in Ownership <input type="checkbox"/> Re-Certification / Renewal	
b. Location where business is conducted:			
c. Official Mailing Address of Maintenance Organization			
d. Line Maintenance Location			
3. Ratings Applied for: Ref: AMO Regs.11 & 12.			
Aircraft <input type="checkbox"/> Class 1 Composite Small Aircraft <input type="checkbox"/> Class 2 Composite Large Aircraft <input type="checkbox"/> Class 3 Metal Small Aircraft <input type="checkbox"/> Class 4 Metal Large Aircraft	Engine – Propellers <input type="checkbox"/> Class1Piston <400hp <input type="checkbox"/> Class2 Piston>400hp <input type="checkbox"/> Class3Turbine Engine <input type="checkbox"/> Class1Fix Pitch Props <input type="checkbox"/> Class2All other Props	Equipment & Instruments <input type="checkbox"/> Class1Comm Equip. <input type="checkbox"/> Class2 Nav. Equip <input type="checkbox"/> Class3 Radar Equip. <input type="checkbox"/> Class1 Instr. Mech. <input type="checkbox"/> Class2 Electrical <input type="checkbox"/> Class3 Gyroscopic <input type="checkbox"/> Class4 Electronic	Accessories <input type="checkbox"/> Class1 Mech. Acc. <input type="checkbox"/> Class2 Electrical Acc. <input type="checkbox"/> Class3 Electronic Acc. <input type="checkbox"/> Class4 APU.

Specialised Service{List Process Specification(s)}

Scope of Ratings Applied for:

4. List of Maintenance Functions contracted to other AMO's:

5. AMO Ownership and Incorporation Confirmation

Name of AMO Owner, {Include name(s) of all Owners, partners, or corporation name. State date of AMO incorporation }

I hereby certify that I have been authorised by the maintenance Organization named in Item 1 above to make this application and that the information given and the statements in the attachments hereto are true and correct to the best of my knowledge.

Date:	Authorised Signature:	Print Name of Authorised Signature:	Title:
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