



**References:**

- CAR 91.109

**Instructions:**

1. This application is for approval of Aircraft Flight Manual (AFM) / Supplement in accordance with CAR Part 91.109.
2. Entries should be typed or printed in block letters. Full model and component designations are required (refer to the manufacturer's data plates).  
*Note: Applicants should clearly understand that unless all the entries on this form are completed accurately and fully, the approval of the Aircraft Flight Manual may be delayed.*
3. Applications must be submitted to CASA not less than 28 days prior to the date required.
4. This form must be accompanied together with the Form CA 91/05 Appendix 1.
5. The completed Aircraft Flight Manual (AFM) application form together with the fee of K1320.00 (GST Inclusive) should be submitted to:

**Director**  
**Civil Aviation Safety Authority**  
**P O Box 1941**  
**BOROKO N.C.D**  
**Papua New Guinea**

**Section A: Aircraft Operator Details**

a. Legal Name of Organisation:						
b. Client ID (if known)						
c. Postal Address of Organisation:						
(Address for Service – Ref Civil Aviation Act Section 48)						
Telephone:				Email:		
d. Person who can be contacted for further information concerning this application:						
Name:						
Position:						

**Section B: AFM Details**

Aircraft type and model to which the AFM applies:	
AFM Name or Reference Number:	

**Section C: Application Type**

New Issue <input type="checkbox"/>	Complete Re-Issue <input type="checkbox"/>	Revision <input type="checkbox"/>
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**Section D: Application Checklist**

Does the AFM contain:		
Defect recording and tracking procedures or reference to their location in another document: <input type="checkbox"/>		
Standard AFM format: <input type="checkbox"/>	Reference to the base document AFM: <input type="checkbox"/>	LEP to define the approved document <input type="checkbox"/>

**Section E: Declaration**

I hereby apply on behalf of the operator detailed in Section A for the approval of the Aircraft Flight Manual specified in Section B above.

Full Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**CASA Use Only**

Date received: ..... AFM Approved Yes  No  Job  
No.....

Assessed by: ..... (Airworthiness Inspector) Date: .....