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Applicant's Specimen Signature

## Exchange to a PNG Part 66 Licence From Previous PNG AME Licence

A completed Fit and Proper Person Questionnaire, form CAA FPP1, is required with this application.

### 1. Personal Details

CASA PNG Client / Licence Number (if known)				Date of Birth (dd/mm/yy)			
Title (Mr/Mrs/Ms/Miss)		Last Name					
Given Name(s)							
Country of Birth				Nationality			
Address for Service - Civil Aviation Act, s48, requires applicants to provide an address for service in PNG (i.e. a physical address) and to promptly notify the Director of any changes.							
Tel		Mob					
Fax		Email					
Postal Address (if different from Address for Service)							
Tel		Mob					
Fax		Email					

### 2. Licence Category

Please indicate required Licence Category. You must enclose your previous licence.	Aeroplane	<input type="checkbox"/>	Rotorcraft	<input type="checkbox"/>	Powerplant	<input type="checkbox"/>	Electrical	<input type="checkbox"/>
	Instrument	<input type="checkbox"/>	Radio	<input type="checkbox"/>	LTA Aircraft	<input type="checkbox"/>	Components	<input type="checkbox"/>

### 3. License Exchange Fee

A fee of <b>K330.00</b> will automatically apply for applications received after the transition period expiry on 01 May 2017.	Date of Application:			
	Name on Receipt			
	Receipt Number			

Unless the full fees are paid, applications will not be processed. PLEASE PAY CASH AND PROVIDE EVIDENCE OF RECEIPT. Applications will not be processed without payment.

### CAA USE ONLY

Receipt No.	Receipt Date	W/R No.

**4. Declaration**

<p><i>The provision of false information or failure to disclose information relevant to the grant or holding of an aviation document constitutes an offence under Section 283 of the Civil Aviation Act 2000 (as amended) and is subject, in the case of an individual, to imprisonment for a term not exceeding 12 months or to a fine not exceeding K\$25,000.</i></p>	<p>I declare that to the best of my knowledge and belief the statements made and the information supplied in this application and the attachments are complete and correct.</p> <p><b>Consent to Disclosure &amp; Collection</b></p> <p>I authorise the collection by the Director of Civil Aviation or his delegate (hereinafter referred to as "the Director") from, and the disclosure to the Director by, any person, organisation or government department of any details of my knowledge &amp; compliance with transport safety regulatory requirements.</p> <p>I authorise the Director to use, and disclose, the information obtained about me for any purpose under the Civil Aviation Act 2000(as amended), or other such purpose permitted by law.</p>			
	<b>Applicant's Signature</b>		<b>Date</b>	

**5. Applicant's Check List**

<p><i>Please ensure all documents are enclosed. Applications which are incomplete or lacking any required documents will be returned.</i></p>	<ol style="list-style-type: none"> <li>1. Previous Licence enclosed <span style="float: right;"><input type="checkbox"/></span></li> <li>2. Fees paid (Note: no fees applied before 01 May 2017) <span style="float: right;"><input type="checkbox"/></span></li> <li>3. Specimen Signature at top of page 1 <span style="float: right;"><input type="checkbox"/></span></li> <li>4. Name and 2 Pssport photos (refer top of page 2) <span style="float: right;"><input type="checkbox"/></span></li> <li>5. Fit and Proper Person Questionnaire – Form FPP1attached <span style="float: right;"><input type="checkbox"/></span></li> </ol>
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**Post this form to: Civil Aviation Safety Authority, PO Box 1941, Boroko NCD, Papua New Guinea, Please allow 10 working days from date of receipt for processing application**

**CAA USE ONLY**

Examinations											Old Licence Enclosed & Cancelled		
Required											Yes	No	N/A
Passed											<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments													
Assessing Officer										Date			