



Papa New Guinea Government

Civil Aviation Safety Authority

Application For Approval Or Revision Of A

Aircraft Flight Manual

Instructions and advice for completing this Application Form

- This application is for approval of Aircraft Flight Manual (AFM) / Supplement in accordance with CAR Part 91.109.
- 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.
- Applications must be submitted to CASA not less than 28 days prior to the date required.
- This form must be accompanied together with the Form CA 91/05 Appendix 1.
- 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:				Fax:		
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:
