

This form is to be completed by the aircraft operator, with the assistance of their Nominated Airworthiness Technical Representative (NATR) & Flight Operations Representative (FOR).

[Registry Publication 17](#) must be reviewed prior to the application to ensure all compliance requirements are understood.

Please email completed form to aircraft@gov.im

1. Type of Survey Required (tick one box ONLY)	
Renewal: <input type="checkbox"/>	Renewal and Export: <input type="checkbox"/> Export Only: <input type="checkbox"/>
2. Aircraft Details	
Registration Mark:	M -
Aircraft Manufacturer:	
Aircraft Type Designation:	
Serial Number:	
Maximum Take-off Mass (KG):	
3. If Applying for a Renewal CoA Only	
Expiry Date of CoA:	
List any major modifications and repairs implemented on the Aircraft, Engine or Propeller since the previous CoA issue/renewal including the Approval reference number if applicable. If no changes please enter NONE in the box.	
4. If applying for an ECoA only or for an ECoA in addition to a renewal CoA	
If requesting an ECoA only – Do you require a survey? <i>By ticking No, you understand the issue date on the Export C of A will be the same as the C of A that was issued as the result of the last aircraft survey</i>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Country ECoA to be Issued To:	

5. Flight Operations Related Documents – this must be completed by the FOR	
Documents Held On:	Hard Copy <input type="checkbox"/> EFB <input type="checkbox"/> Both <input type="checkbox"/>
5.1 Aircraft Flight Manual (AFM) or Pilot Operating Handbook (POH)	
AFM/POH Name and Reference Number: <i>The document must conform to that detailed on the respective aircraft Type Certificate Data Sheet</i>	
Current Revision Number:	
Current Issue Date:	
5.2 Master Minimum Equipment List (MMEL) Compliance (if applicable)	
TCDS MMEL Revision Number and Revision Date:	
For EASA Part NCC declared operator ONLY – EASA MMEL Revision Number and Revision Date:	
Approved MEL Revision Number:	
6. Proposed Survey Details	
Proposed Date of Survey Commencement: <i>Surveys are normally carried out remotely with appropriate technology support - please contact the registry if you wish to request an on-site attended survey. Surveys will be carried out Monday to Friday except for public holidays.</i>	
TCDS <u>State</u> & <u>Number</u> that the aircraft will be compliant to for Survey:	
Name of Person Presenting the Aircraft (PPtA) <i>If not the NATR please refer to page 1 of RP 17 which details the responsibilities of the NATR to the named person presenting the aircraft.</i>	
E-mail Address:	
Mobile Number:	
7. Declaration	
<p>I hereby declare that to the best of my knowledge all the information entered on this application is accurate in every respect.</p> <p>I also declare that before the date of survey commencement requested on this application form that:</p> <ul style="list-style-type: none"> • a full records review will have been completed, and • a review of the physical aircraft will have been carried by an appropriately experienced person for full assembly. <p>By signing this declaration, I understand that I am agreeing to all charges in connection with this application in accordance with the current Scheme of Charges, including a cancellation fee if this application is cancelled, on behalf of the Registered Owner/Operator.</p>	
Signature of Applicant:	<input type="text"/>
Name of Applicant:	<input type="text"/>
For, or On Behalf Of (Operator):	<input type="text"/>
Date:	<input type="text"/>