



CIVIL AVIATION AUTHORITY OF MALAYSIA

PIHAK BERKUASA PENERBANGAN AWAM MALAYSIA

APPLICATION FOR RENEWAL/VARIATION OF APPROVED SIGNATORY APPROVAL

(Civil Aviation Regulation 2016)

SECTION 1 – ORGANIZATION DETAILS

1.1	Organization name	:	GALAXY AEROSPACE (M) SDN BHD		
1.2	Organization Approval No.	:	a.	CAMO / 2016/03	b. AOC No. (if any)
1.3	Organization Address	:	SUITE 11-14, HELICOPTER CENTRE, MALAYSIA INTERNATIONAL AEROSPACE CENTRE, SULTAN ABDUL AZIZ SHAH AIRPORT, 47200 SUBANG, SELANGOR		

SECTION 2 – INFORMATION OF APPROVED SIGNATORY AND OTHER DETAILS

2.1	Name	:	MOHAMAD SYAFIQ BIN ISMAIL	Renewal:	<input type="checkbox"/>	Variation:	<input checked="" type="checkbox"/>
2.2	AS approval type	:	AIRWORTHINESS REVIEW STAFF				
2.3	Current Privilege	:	AIRWORTHINESS REVIEW REPORT (LEONARDO HELICOPTER AW139 & ROBINSON HELICOPTER R66)				
		:	PERMIT TO FLY (LEONARDO HELICOPTER AW139 & ROBINSON HELICOPTER R66)				
2.4	Privilege applied	:	AIRWORTHINESS REVIEW REPORT (ROBINSON HELICOPTER R44 I & R44 II)				
		:	PERMIT TO FLY (ROBINSON HELICOPTER R44 I & R44 II)				
2.5	Supporting documents	:	<input checked="" type="checkbox"/> Qualifications	<input checked="" type="checkbox"/> Training	<input type="checkbox"/> Quality Assessment		
		:	<input checked="" type="checkbox"/> Experience/CV	<input checked="" type="checkbox"/> Appointment Letter			
2.6	Payment	:	a. Date		b. Receipt Number	:	

SECTION 3 – APPLICANT DECLARATION

I hereby declare that all the information provided in this application and in the attached documents made for this application, to the best of my knowledge is true and correct.

Signature Date :

Name DATO' SHAMSUL KAMAR BIN SAMSUDIN

Position ACCOUNTABLE MANAGER

(The signature for this declaration shall be from the accountable manager)

SECTION 4 – CAAM OFFICIAL USE ONLY

Received by : Date :

Remark :

INSTRUCTION FOR USE

SECTION 1	
1.1	Fill up organization name.
1.2a	Fill up the organization type approval issued by CAAM (e.g:ATO, CAMO, DOA, POA, AMO etc) and approval number.
1.2b	Fill up the organization address.
SECTION 2	
2.1	Fill up the approved signatory name and tick either for renewal only or variation.
2.2	Fill up the approved signatory type currently hold by the person. Only one type of approval per application.
2.3	Fill up the current privilege (e.g; Airworthiness Review Report, Compliance Verification Engineer, Practical Assessor, Knowledge Examiner, Other DOA Approved Signatory etc)
2.4	Fill up the additional privilege applied.
2.5	Tick and attach supporting documents
2.6	Fill up payment date and receipt number and attach evidence of payment or receipt.
SECTION 3	
3.1	Declaration by the accountable manager, fill up the name, position, date. *If accountable manager not available, his quality monitoring post holder.
SECTION 4	
	To be filled up by CAAM