

Application for Issue or Amendment of a Microlight Aircraft Flight Permit



Applicant to complete form and then forward application to:
 Manager Aircraft Certification
 Civil Aviation Authority
 PO Box 3555
 Wellington 6140

Or email: administrator.airlines@caa.govt.nz

Note: The CAA Standard Rate hourly charge applies.

1. OWNERSHIP DETAILS

| | | | | | |
|--|--|--------------------|--|---------------------------------|--|
| Owners Name (in full): | | | | | |
| <i>Surname</i> | | <i>Forename(s)</i> | | <i>Client ID No. (if known)</i> | |
| Address for Service: <i>Civil Aviation Act, s8, requires applicants to provide an address for service in New Zealand (ie, a physical address) and to promptly notify the Director of any changes</i> | | | | | |
| | | | | | |
| | | | | | |
| Tel: | | Email: | | | |
| Postal Address: <i>(If different from Address for Service.)</i> | | | | | |
| | | | | | |
| | | | | | |
| Tel: | | Email: | | | |

2. AIRCRAFT PARTICULARS

| | | | |
|---|--|--------|--|
| Aircraft Manufacturer: | | Model: | |
| Constructors Name: | | | |
| Manufacturers Serial No: | | | |
| Engine Manufacturer/Model: | | | |
| Propeller Manufacturer (Model & Size): | | | |
| Note: Please provide a copy of the manufacturer's Statement of Conformity, Release Note, or receipt, or equivalent document, that came with the aircraft, engine and propeller. Or, alternatively, provide a photo of the serial number or dataplate on the aircraft, engine and propeller. The purpose is to ensure the aircraft is registered correctly and the correct details are entered on the Flight Permit. | | | |

3. CERTIFICATION BASIS

| | | | | | |
|---|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| Basis of Type Acceptance per CAR §103.207(a) – (Only required if a new type in New Zealand) | | | | | |
| BCAR 'S' | <input type="checkbox"/> | TP10141E | <input type="checkbox"/> | CAO 95.32 | <input type="checkbox"/> |
| ANO 101.55 | <input type="checkbox"/> | FAR 103 | <input type="checkbox"/> | CAR 103 | <input type="checkbox"/> |
| Other | <input type="checkbox"/> | | | | |
| Documented evidence must be provided with this application to support the selection | | | | | |
| Evidence attached | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> | (Give reason below) |
| | | | | | |
| | | | | | |

4. CLASSIFICATION

| | |
|--|----------------------------------|
| Class 1 <input type="checkbox"/> | Class 2 <input type="checkbox"/> |
| Note: Single seat microlight helicopters must be classified as Class 2 | |

5. REGISTRATION

| | | | | | |
|------------------------------------|------------------------------|-----------------------------|------|-----|--|
| Has registration been applied for? | Yes <input type="checkbox"/> | No <input type="checkbox"/> | Mark | ZK- | |
|------------------------------------|------------------------------|-----------------------------|------|-----|--|

6. INSPECTION FOR ISSUE & FLIGHT PERMIT

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|--|--|----|--|
| Aircraft will be available for inspection at: | | on | |
| Engineer or organisation preparing the records: | | | |
| Contact No. of person making aircraft available: | | | |

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|-----------------------------------|
| Brief History of Aircraft: |
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7. DECLARATION

I declare that the foregoing application details are true in every respect.

Signed: Date:

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| Note: An invoice will be sent out when the Flight Permit has been issued. |
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SUPPORTING REMARKS

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