

EASA Form 2 - Part-CAMO Approval

Application for initial issue of an Approval acc. Part-CAMO
or significant changes to a CAMO

Please fill in the framed fields of the form, sign it and send it together with attachments to teo@austrocontrol.at, or via FAX to +43 5 1703 1666, or by post to:

AUSTRO CONTROL GmbH, Aviation Agency, Schnirchgasse 17, 1030 Vienna, Austria

1 Application for

Initial issue of a CAMO

Change to a CAMO

Austro Control GmbH is the Competent Authority of Austria for Part-M Approvals. Austria is a Member State of the European Union.

2 Organisation

Registered Name of the Organisation (acc. commercial register)

Trade Name (if different)

CAMO Approval number (only for Changes)

Location for which approval is applied for

Street Place Postal Country

Telephone Fax E-Mail

3 Scope of the approval relevant to this application

CAMO type: Part of an AOC

Not Part of an AOC

Airw. Review

Others:

4 Accountable Manager (or proposed AM)

Title First name Last name

Position in the Organisation

5 Signature of the (proposed) Accountable Manager

Place Date Signature of (proposed) Accountable Manager

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6 Scope of Aircraft types

Aircraft Type	Approved Maintenance Programme	Review acc. M.A. 901 or M.L.A.:903		Permit to fly		Subcontractor (organisations working under Quality system)
<input type="text"/>	<input type="text"/>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="text"/>

With reference to the above scope, pls complete the form similar to the following example:

Boeing B737	AMP-BSP-B373-300	X Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	X No	none
Cessna 172	IHP-DDD-small-172	<input type="checkbox"/> Yes	X No	<input type="checkbox"/> Yes	X No	-
Falcon 900 EX Easy	AMP-F9EX-Testair	X Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	X No	Help Inc.