

CIVIL AVIATION COMMITTEE OF THE REPUBLIC OF ARMENIA	AIRWORTHINESS INSPECTOR HANDBOOK	CHAPTER 27 FORM 2 FOR PART 145/CAMO/CAO
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1. Form (CAC) 2 Application for Part 145, CAO and CAMO

2. Applicant Address and Contact Data

2.1 Applicant Data

2.1.1 Name and Address (registered (business) name and address/legal seat of the company)	Registered Name	
	Trading Name	
	Street / Nr	
	Post Code	
	City	
	Country	Armenia
2.1.2 Contact Person (responsible for this form application)	Family name	
	First name	
	Job title	
	Phone / Fax	
	Email	

Important Note: An approval may be granted to an organisation which may be either a natural person, a legal entity or part of a legal entity. Would you therefore please include with this application confirmation of the legal status of your organisation and enclose a copy of your Certificate of Incorporation.

2.2 Shipping Data (may be left blank, if same as 2.1 Applicant Data)

2.2.1 Delivery Address (for the shipping of original CAC documents)	Company Name	
	Street / Nr	
	Post Code	
	City	
	Country	Armenia

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Technical Application Data

3. References

CAC Part 145 N°	
CAC Part CAMO N°	
CAC Part CAO N°	

4. Addresses of location (s) requiring approval
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4.1 Principal place of business (may be left blank, if same as 2.1 Applicant Data)	Street / Nr	
	Post Code	
	City	
	Country	
	Airport Code (IATA)	

4.2 Additional locations Enter "Not applicable" in the case the Additional Location where maintenance or continuing airworthiness functions are exercised are the same as 4.1 Principal Place of Business.

4.2.1 Location 1	Street / Nr	
	Post Code	
	City	
	Country	
	Airport Code (IATA)	

4.2.2 Location 2	Street / Nr	
	Post Code	
	City	
	Country	
	Airport Code (IATA)	

4.2.n Location N	Street / Nr	
	Post Code	
	City	
	Country	
	Airport Code (IATA)	

[duplicate table as applicable]

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4.3 Line Maintenance Location(s)
 Enter "Not applicable" in the case the Line Maintenance Location is the same as **4.1 Place of Business** or in the case of CAC Form 2 used for Part- MF/CAO/MG/CAMO applications/approvals.

4.3.1 Location 1	Street / Nr	
	Post Code	
	City	
	Country	
	Airport Code (IATA)	

4.3.2 Location 2	Street / Nr	
	Post Code	
	City	
	Country	
	Airport Code (IATA)	

4.3.n Location n	Street / Nr	
	Post Code	
	City	
	Country	
	Airport Code (IATA)	

[duplicate table as applicable]

5. Contacts

5.1. Accountable Manager	Family name	
	First name	
	Phone/Fax	
	Email	

5.2. Compliance Monitoring Manager	Family name	
	First name	
	Phone/Fax	
	Email	

5.1. Safety Manager	Family name	
	First name	
	Phone/Fax	
	Email	

6. Identification of Activity			
6.1 Application for	<input type="checkbox"/> Part 145 Approval	<input type="checkbox"/> Part CAO Approval	<input type="checkbox"/> Part CAMO Approval
6.2 Application Type	<input type="checkbox"/> Initial application		
	<input type="checkbox"/> Revision of initial application		
	<input type="checkbox"/> Organisation name	<input type="checkbox"/> Scope	
	<input type="checkbox"/> Address data	<input type="checkbox"/> Contact detail(s)	
	<input type="checkbox"/> Nominated persons	<input type="checkbox"/> Number of staff	
	<input type="checkbox"/> Application for change		
	<input type="checkbox"/> Organisation name	<input type="checkbox"/> Scope	<input type="checkbox"/> Others
	<input type="checkbox"/> Address data	<input type="checkbox"/> Contact detail(s)	
	<input type="checkbox"/> Nominated persons	<input type="checkbox"/> Number of staff	
	<input type="checkbox"/> Renewal		
<input type="checkbox"/> Notification of surrender			
6.3 Terms of Part 145, Part CAO or Part CAMO Approval and scope of work relevant to this application Provide information on change of manager, addition of line station, etc. For scope of work, refers to section 8a, 8b or 8c.			

7. Number of staff		
a) The total number of staff employed by the organisation in order to comply with CAC Part 145/ Part CAO/ Part CAMO		
b) The number of contracted staff associated with the proposed approval		
	a) Employees	b) Contractors
Total		

8a. Scope of requested Part 145 Approval

In case of application for change of the scope of work, only the parts of this table affected by the change shall be completed.

	RATING	LIMITATION	BASE		LINE	
			Yes	No	Yes	No
AIRCRAFT	A1 Aeroplanes/airships above 5700 Kg					
	A2 Aeroplanes/airships 5700 Kg and below					
	A3 Helicopters					
	A4 Aircraft other than A1, A2 or A3					
ENGINES	B1 Turbine					
	B2 Piston					
	B3 APU					
COMPONENTS OTHER THAN COMPLETE ENGINES OR AUXILIARY POWER UNITS	C1 Air Cond & Press <input type="checkbox"/>					
	C2 Auto Flight <input type="checkbox"/>					
	C3 Comms and Nav <input type="checkbox"/>					
	C4 Doors – Hatches <input type="checkbox"/>					
	C5 Electrical Power & Lights <input type="checkbox"/>					
	C6 Equipment <input type="checkbox"/>					
	C7 Engine – APU <input type="checkbox"/>					
	C8 Flight Controls <input type="checkbox"/>					
	C9 Fuel <input type="checkbox"/>					
	C10 Helicopter – Rotors <input type="checkbox"/>					
	C11 Helicopter – Trans <input type="checkbox"/>					
	C12 Hydraulic Power <input type="checkbox"/>					
	C13 Indicating/Recording System <input type="checkbox"/>					
	C14 Landing Gear <input type="checkbox"/>					
	C15 Oxygen <input type="checkbox"/>					
	C16 Propellers <input type="checkbox"/>					
	C17 Pneumatic & Vacuum <input type="checkbox"/>					
	C18 Protection Ice/Rain/Fire <input type="checkbox"/>					
	C19 Windows <input type="checkbox"/>					
	C20 Structural <input type="checkbox"/>					
	C21 Water Ballast <input type="checkbox"/>					
	C22 Propulsion Augmentation <input type="checkbox"/>					
SPECIALISED SERVICES	D1 Non Destructive Testing	<input type="checkbox"/> Eddy Current Inspection				
		<input type="checkbox"/> Liquid Penetrant Inspection				
		<input type="checkbox"/> Magnetic Particle Inspection				
		<input type="checkbox"/> Radiography Inspection				
		<input type="checkbox"/> Shearography Inspection				
		<input type="checkbox"/> Thermography Inspection				
		<input type="checkbox"/> Ultrasonic Inspection				
<input type="checkbox"/> Other Method	State particular NDT method(s)					

SPECIALISED ACTIVITIES IN THE COURSE OF MAINTENANCE	
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8b. Scope of requested Part CAO Approval		
In case of application for change of the scope of work, only the parts of this table affected by the change shall be completed.		
	RATING	PRIVILEGES
AIRCRAFT	Aeroplanes — other-than-complex motor-powered aircraft	<input type="checkbox"/> Maintenance <input type="checkbox"/> Continuing-airworthiness management <input type="checkbox"/> Airworthiness review <input type="checkbox"/> Permit to fly
	Aeroplanes up to 2 730 kg maximum take-off mass (MTOM)	<input type="checkbox"/> Maintenance <input type="checkbox"/> Continuing-airworthiness management <input type="checkbox"/> Airworthiness review <input type="checkbox"/> Permit to fly
	Helicopters — other-than-complex motor-powered aircraft	<input type="checkbox"/> Maintenance <input type="checkbox"/> Continuing-airworthiness management <input type="checkbox"/> Airworthiness review <input type="checkbox"/> Permit to fly
	Helicopters up to 1 200 kg MTOM, certified for a maximum of up to 4 occupants	<input type="checkbox"/> Maintenance <input type="checkbox"/> Continuing-airworthiness management <input type="checkbox"/> Airworthiness review <input type="checkbox"/> Permit to fly
	Airships	<input type="checkbox"/> Maintenance <input type="checkbox"/> Continuing-airworthiness management <input type="checkbox"/> Airworthiness review <input type="checkbox"/> Permit to fly
	Balloons	<input type="checkbox"/> Maintenance <input type="checkbox"/> Continuing-airworthiness management <input type="checkbox"/> Airworthiness review <input type="checkbox"/> Permit to fly
	Sailplanes	<input type="checkbox"/> Maintenance <input type="checkbox"/> Continuing-airworthiness management <input type="checkbox"/> Airworthiness review <input type="checkbox"/> Permit to fly
COMPONENTS	Complete piston engines	<input type="checkbox"/> Maintenance
	Complete piston engines	
	Electrical engines	
	Components other than complete engines	
SPECIALISED SERVICES	Non-destructive testing (NDT)	<input type="checkbox"/> NDT Specify the particular NDT methods

8c. Scope of requested Part CAMO Approval

In case of application for change of the scope of work, only the parts of this table affected by the change shall be completed.

Rating	Aircraft type/series/group (with engine type)	Airworthiness Review	Permits to Fly	Subcontracted organisations
A1 Aeroplanes/airships above 5700 Kg				
A2 Aeroplanes/airships 5700 Kg and below				
A3 Helicopters				
A4 Aircraft other than A1, A2 or A3				

9. Sub-contracted organisations address data

Name/Address	
Name/Address	

[add rows as applicable]

10. Other CAC approvals held by the applicant

CAC POA Approval		CAC DOA Approval	
CAC MTOA Approval		CAC AOC Approval	
CAC AMO Approval		CAC Part CAMO Approval	

11. Applicant's declaration and acceptance of the general conditions and terms of payment

Date/Location	Name	Signature of Accountable Manager

Important note: CAC does not accept applications without signature. The signature of either the Accountable Manager or of the new proposed Accountable Manager is always required.