

Αį	oplication for
	Initial Grant
	Renewal
	Variation

APPLICATION FOR HKAR-145 APPROVAL

1. Applicant Data Legal name	and seat of the compan	y as it appears on the Business Registration or similar legal document
1.1 Registered Name and Address	Registered Name	
(registered name and legal	Trading Name	
seat of the company)	Address	
1.2 Date of Business Registration	on (BoR)	
1.3 Postal Data (addresses may	be left blank, if sai	ne as 1.1 Applicant Data)
1.3.1 Billing Address (For the receipt of CAD	Company Name	
Fees and Charges Invoices. CAD invoices are issued to	Address	
the address provided here)		
1.3.2 Postal Address (For the shipping of original	Company Name	
CAD documents, if requested; when different	Address	
from 1.1)		
2. Need and Readiness for In (for organisation outside		
2.1 Supporting Organisation	Company Name	
	Address	
2.2 Supporting Document		ter from Hong Kong based organisation
	Assessment re	port from Hong Kong based organisation

Technical Application Data			
3. References			
3.1 HKAR-145 Approval Number: (for Renewal/Variation application)			
4. Addresses of site (s) requiring	g approval		
4.1 Principal place of business (may be left blank, if same as 1.1 Applicant Data)	Address		
4.2 Base, Engine and Component N	 Maintenance	Site(s)	
4.2.1 Facility/Site 1	Address		
4.2.2 Facility/Site 2	Address		
4.2.3 Facility/Site 3	Address		
4.3 Line Maintenance Location(s):	Enter "Not app Business	licable" in the case the Maintenance Site is the same as 4.1 Principle Place of	
4.3.1 Facility/Site 1	Address		
4.2.2 E	A 11		
4.3.2 Facility/Site 2	Address		
4.2.3. Facility/Site 3	Address		
·			
4.2.4. Facility/Site 4	Address		
4.2.5. Facility/Site 5	Address		

5. Contacts			
5.1 Accountable Manager	Title	☐ Mr ☐ Ms	
	Surname		
	First name		
	Job title/Position		
	Phone/Fax		
	Email		
5.2. Quality Manager	Title	☐ Mr ☐ Ms	
	Surname		
	First name		
	Job title/Position		
	Phone/Fax		
	Email		
6. Identification of Activi	ity		
6.1 Application Type	Initial application	ion	
	Revision of init	ial application	
	☐ Organisa ☐ Address	ation name	Rating(s)
	<u> </u>	ted persons	Contact detail(s) Others:
	Application for	change	
		ation name	Rating(s)
	Address Nominat	data ted persons	Contact detail(s) Others:
	Notification of		
6.2 Scope of HKAR-145			

CLASS		RATING	LIMITATIO	N BASI	LINI
AIRCRAFT	□ A1	Aeroplanes above 5,700 kg			
	□ A2	Aeroplanes 5,700 kg and below			
	□ A3	Helicopters			
	□ A4	Aircraft other than A1, A2 and A3	_		
	□ B1	Turbine			
ENGINE	□ B2	Piston			
	□ B3	APU			
	□ C1	Air Cond & Press			
COMPONENTS	□ C2	Auto Flight			
OTHER THAN	□ C3	Comms and Nav			
COMPLETE	□ C4	Doors – Hatches			
ENGINES OR	□ C5	Electrical Power & Lights			
APUs	□ C6	Equipment			
	□ C7	Engine – APU			
	□ C8	Flight Controls			
	□ C9	Fuel			
	□ C10	Helicopter – Rotors			
	☐ C11	Helicopter – Trans			
	☐ C12	Hydraulic Power			
	☐ C13	Indicating/Recording Systems			
	□ C14	Landing Gear			
	☐ C15	Oxygen			
	□ C16	Propellers			
	□ C17	Pneumatic & Vacuum			
	☐ C18	Protection ice/rain/fire			
	☐ C19	Windows			
	□ C20	Structural			
	□ C21	Water Ballast	_		
	□ C22	Propulsion Augmentation			
SPECIALISED	□ D1	Non Destructive Testing	Please select as appropriate:		
SERVICES			☐ Eddy Current Inspection	☐ Liquid Penetrant Inspect	ion
			☐ Magnetic Particle Inspection	☐ Radiography Inspection	
			☐ Shearography Inspection	☐ Thermography	
			Ultrasonic Inspection	☐ Other method, please spe	cify:
SPECIALISED ACTIVITIES					

8. Fee Information
The applicant will be charged in accordance with Hong Kong Air Navigation (Fees) Regulations (CAP. 448 sub. leg. D), Schedule, paragraph 8(2). For details of the deposit fee, please refer to Field 8 of the "Completion Instructions" of this form.
In the case of withdrawal or other cases of termination of the application, the expenditure incurred in the investigation will be recovered. The expenditure includes working hours and specific costs and, if applicable, transport costs outside Hong Kong.
The deposit will be returned to the applicant after deducting all expenditure. If the deposit is insufficient, the applicant shall pay the outstanding balance prior to issuance of the certificate or upon termination of the application.

Should the approval remain in force, the applicant will be charged in accordance with Hong Kong Air Navigation (Fees) Regulations (CAP. 448 sub. leg. D), Schedule, paragraph 8(5).

9. Applicant's declaration

I declare that the information provided in this application form is correct and complete. I agree to pay the fees levied by the Hong Kong SAR Government in respect of this application.

9.1 Attachments

I am submitting this application form together with the following applicable documents:

Attachment No.	t Documentation		Reference		Field No. Reference
(A) 🗌	Business Registration Certificate				1
(B) 🗌	Supporting Letter				2.1
(C) 🗆	Assessment Report				2.2
(D) 🗌	Deposit fee		Amount: HK\$ Date:		8
			Bank		
			*Payment Reference/Cheque #:		
			* delete whichever not applicable		
(E) 🗌	CAD Form Four (D	OCA 192)			
(F)	Maintenance Orga	anisation Exposition			
(G) 🗆	Safety Manageme	ent System Manual			
(H) 🗌	HKAR-145 Comp	pliance Matrix			
(I)	Internal Audit Rep	port			
(J) 🗌	Others e.g. Capability List				
9.2 Signature	e				
Na	ime	Accountable Manager	Signature	Date (c	l/m/y)

Completion Instructions

The **original** completed application, the **deposit** and **required documents** shall be sent to:

Airworthiness Office, Flight Standards and Airworthiness Division

Civil Aviation Department

Civil Aviation Department Headquarters

1 Tung Fai Road, Hong Kong International Airport, Lantau, Hong Kong

Attention: Chief, Airworthiness Standards

Note: To facilitate the application process, the completed application may be emailed to: awo@cad.gov.hk in advance

Important notes:

- 1. For application from an organisation which is located, in whole or in part, outside the territories of Hong Kong, Before proceeding to submit an application by using this form, the application shall provide the followings from an organization based in Hong Kong.
 - (i) Evidence that such organisation would like to use the applicant's facilitates to support the maintenance of an aircraft/aircraft component.
 - (ii) An assessment report demonstrating that the applicant is readily in compliance with HKAR-145.
- 2. Complete all Fields in a clear legible way. Enter 'N/A' for those fields that are not applicable to this application.
- 3. Within one Field, mark only one box with where appropriate.

1. Applicant Data	
1.1 Registered Name and Address	 Registered Name: Please enter the full name of the company as it appears on the Certificate of Incorporation/Business Registration or similar legal document stating name of the company. Trading name: if you are using a Trade name differing from the registered company name, please indicate it here, otherwise enter "Not applicable". Address: Address of the company as it appears on the Certificate of Incorporation/Business Registration or similar legal document stating the seat of the company.
1.2 Date of the Business Registration	 Please provide the date of the Business Registration or similar legal document stating name and seat of the company. A copy of the Business Registration or similar legal document stating name and seat of the company shall be provided together with an Initial application or an application for name change. Additional translation in English language of this document should be submitted.
1.3.1 Billing Address	The (company) name and address specified in this section will be printed on the invoice/s CAD will issue. A (company) name different from the one entered in section 1 "Applicant Registered Name" can only be accepted by CAD upon justified request. Please leave blank if the Billing Address is the same as the registered name and address.
1.3.2 Postal Address	The (company) name and postal address specified in this section is where CAD will send the original certificate/approval, if requested. Please leave blank if the Postal Address is the same as the registered address.
2. Need and Readiness for A	Approval (for organisation outside the territories of Hong Kong)
2.1	Refer HKAR-145 Section 4 Appendix 5 paragraph 1.2 for requirements of supporting document from Hong Kong based organisation
2.2	Refer HKAR 145 Section 4 Appendix 5 paragraph 1.2 for assessment report from a Hong Kong based organisation
3. References	
3.1 HKAR-145 Reference	Please enter your HKAR-145 Approval number. If you do not hold a HKAR-145 Approval number, enter "Not applicable".

4. A	ddresses of site (s) requ	niring approval			
4.1	Principal place of	Enter the address of the Principal Place of Business (PPB). PPB means the h			
	business	office or the registered office of the undertaking within which the principal financial			
		functions and operational control of the activities referred to in the HKAR-145 are			
		exercised.			
4.2	Base, Engine and	Enter the address (es) of any additional site(s) used by the organisation, where			
	Component	HKAR-145 activities are exercised, except for Line Maintenance Locations to be			
	Maintenance site(s)	listed in block 3.3.			
	waintenance site(s)	This block shall be used to identify site(s) in addition to the PPB, where the			
		organisation is performing maintenance or having offices (ex. Office of the			
		Accountable Manager, Records Archive, additional Base Maintenance facilities,			
		etc).			
4.3	Line maintenance	Enter the address (es) of the line maintenance location(s). All the line stations shall			
т.5	location(s)	be listed. This block is only applicable for organisations applying to A1, A2, A3 &			
	iocation(s)	A4 ratings.			
5 C	ontacts	711 Tutings.			
		Diagram at the full data its of the managed Assessment Managem. The tame			
5.1.	Accountable Manager	Please enter the full details of the proposed Accountable Manager. The term			
<i>5</i> 2	Ouglity Manager	"proposed" only remains applicable until the application has been approved.			
5.2	Quality Manager	The Quality Manager is the person in the maintenance organisation who is in charge			
		to maintain the relationship with the Civil Aviation Department. The name and contact details specified in this section are those of the person responsible for the			
		application. The Quality Manager will also act as the contact person in case CAD			
(T	1 ,00 ,0	has administrative questions related to the application.			
	dentification of Activity				
6.1	Application Type	Application for initial grant : Tick this box when applying for an initial HKAR-14			
		approval.			
		Revision of the Initial Application: Tick this box in the case the maintenance			
		organisation intends to revise its' application before the HKAR-145 approval is			
		granted. Please select the box corresponding to the type of change(s). • Organisation name			
		• Address(es)			
		Nominated persons Nominated persons			
		• Rating(s)			
		Contact details			
		Number of staff			
		[Multiple selection is possible].			
6.2	Scope of HKAR-145	Please describe the scope of the application. In case of an initial application			
	Approval relevant to	basically the maintenance organisation shall summarise the requested ratings			
	this application	without specifying the aircraft, engine/APU types e.g.:			
		A1 line and base maintenance; A2 line maintenance only			
		• B1; C2; C14			
		 Specialised activities in the course of maintenance. 			
		In case of application for revision of initial application, only indicate the			
		relevant change.			
7. S	cope of requested Part-	145 Approval			
Scop	oe of requested HKAR-	Please describe in detail the scope of the application.			
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 compiled.			
Airc	eraft:	A1 rating: Quote the requested aircraft type(s) as defined in Section 5			
Rati	ng A limitation	Appendix I of HKAR-66 as amended.			
	-	A2 rating : Quote the requested aircraft type(s) as defined in Section 5			
		Appendix I of HKAR-66 as amended.			
		A3 rating: Quote the requested aircraft type(s) as defined in Section 5			
		71 ()			

	A4 rating:		IKAR-66 as amended. uested aircraft type(s) as defined in Section 5	
	A4 raung.		IKAR-66 as amended.	
	E.g.: Boeing 747-200/300/400 (RR RB211) Boeing 777-200/300 (RR RB211 Trent 800) Airbus A319/A320/A321 (IAE V2500) Airbus A330 (RR RB211 Trent 700)			
	Line & Base: For each aircraft type the maintenance organisation must define type of maintenance by putting Yes or No in the column Base and Line maintenance activity.			
		Form 2 is the orendorsement" of For example, when the limitation of	be included within the column "Limitation" of the one addressed within the column N° 3 "type rating of Section 5 Appendix 1 of HKAR-66 as amended. Then an organisation applies for an A1 rating (A319), of the Form 2 must only address the A319 and NOT B/A319/A320/A321.	
P .	D4 (1			
Engines: Rating B limitation	B1 rating: Quote the requested engine type(s) as defined in the engine TCDS. B2 rating: Quote requested engine manufacturer or group or type as defined by the OEM			
	B3 rating: Quote the requested APU type(s) as defined by the OEM.			
	The B rating is required for maintenance of engines according to the Engine shop Maintenance Manual.			
Components:	For the Cx ratings: The requested class C rating shall be ticked.			
Rating C limitation			r maintenance of components according to the	
	•	aintenance Manua		
	,		manufacturer or component manufacturer or the	
	•	•	d/or the maintenance task(s), cross referencing to a	
Charielized Complete	capability list in the exposition.			
Specialised Services Rating D limitation	D1 rating: The requested class NDT method(s) shall be ticked. Note: Holding the rating D1 enables the organisation to issue a CAD Form 1 limited			
Rating D innitation	to the accomplishment of the NDT inspection.			
	Boroscope inspection are not considered as being listed under the D1 rating (refer			
	AMC 145.30(f)(8).			
Specialised Activities	` *	,	h as NDT, painting, welding, plating, plasma spray,	
		,	be performed in the "course of maintenance" under	
	any rating (Ax	· /	he mentioned if contracted to another HV AD 145	
	These activities do not need to be mentioned if contracted to another HKAR-145 AMO (as listed in MOE).			
8. Fee Information	<u> </u>			
			vering the investigation cost of this application. The	
	_	nay vary regardle	ss of the result of application. Payment can be made	
	by: (i) wire transfer to the CAD account at Hong Kong and Shanghai Banking			
	` '		ount details are as follows:	
		's Name	Hong Kong and Shanghai Banking Corporation	
	Bank A	account No.	002-268126-008	
			Swift Code: HSBC-HKHH-HKH	
	Bank A	Bank Account Holder The Government of Hong		
			Treasury No. 1 Collection Account (Attn: Civil Aviation department)	
	Banker	's Address	No. 1 Queen's Road, Central, Hong Kong	
1				

	OR (ii) A crossed cheque or a bank draft in Hong Kong dollars payable to "The Government of the Hong Kong Special Administrative Region" and drawn on bank located in Hong Kong.		
9. Applicant's declaration	8 8		
9.1(E) CAD Form Four	The application shall submit all CAD Form Four for personnel as defined in HKAR		
(DCA 192)	145.30(a), HKAR 145.30(b) and HKAR.30(c).		
9.1(H) HKAR-145 The application shall provide a compliance matrix for HKAR-145 requireme			
Compliance Matrix	cross reference to the maintenance organisation exposition.		
9.2 Signatures	The signature of either the Accountable Manager or of the new proposed		
	Accountable Manager (in case of initial HKAR-145 application) is required.		

Personal Data Collection Statement

1. Purposes of Collection

The personal data provided by means of this form, including all the supporting documents included in the application, will be used by Civil Aviation Department for the following purposes:

- a. Processing of your application in this form;
- b. Carrying out relevant provisions of the Civil Aviation Ordinance (Chapter 448) and its subsidiary Orders / Regulations;
- c. Assisting in the enforcement of any other Ordinances and Regulations by other Government Bureaux and Departments;
- d. For communication purposes between Civil Aviation Department and yourself;
- e. For validation and verification of authenticity of your supporting documents in association with the application;
- f. For statistics and research purposes on the condition that the resulting statistics or results will not be made available in a form which will identify the data subjects.

It is obligatory for you to supply the personal data as required in this form. If you fail to supply the required data, we may not be able to process your application.

2. Classes of Transferees

The personal data you provided by means of this form may be disclosed to:

- a. Other Government Bureaux and Departments for the purposes mentioned in paragraph 1 above;
- b. Other Contracting States of the International Civil Aviation Organisation and Civil Aviation Authorities for the purpose mentioned in paragraph 1 above;
- c. Other organisations or agencies for execution of their duties as required by Civil Aviation Department.

3. Access to Personal Data

You have a right of access and correction with respect to personal data as provided for in Sections 18 and 22 and Principle 6 of Schedule 1 of the Personal Data (Privacy) Ordinance. Your right of access includes the right to obtain a copy of your personal data provided by this form.

4. Enquiries

Enquiries concerning the personal data collected by means of this form, including the making of access and correction, should be addressed to:

Airworthiness Office
Flight Standards and Airworthiness Division
Civil Aviation Department Headquarters
1 Tung Fai Road
Hong Kong International Airport
Lantau, Hong Kong

(Attn.: Senior Airworthiness Officer (Standards))

Anti-bribery Reminder

Anyone, while having dealings of any kind with the Civil Aviation Department (CAD), should not offer advantage to the CAD officers, or else he may commit an offence under section 4(1) and/or section 8 of the Prevention of Bribery Ordinance (Chapter 201 of Laws of Hong Kong), and be liable to a maximum penalty of a fine of \$500,000 and imprisonment for 7 years.