

Part 39 application for alternate means of compliance

te: The CAA standard hourly charge applies.				For CAA use only AMOC N°.	
NSTRUCTIONS:		n is required by Civil Aviatio a 10% latitude on a repetitiv			
	Email complet	ed form to certification@caa	a.govt.nz or post to	CAA, PO Box 3555, Wel	lington 6140
SECTION A:	To be	completed by the applicant			
Aircraft Type:			Component:		
Registration			Part No & Serial N	lo:	
Airworthiness D	irective referen	ice:			
Tick appropriate	box:	Alternative means of co	mpliance	Adjustment of comp	liance time
Period of validit	:y				
	_	: (should demonstrate equi	valent loval of cofe	* \/)	
i i oposed mean				• • • •	
Requested by:					
Requested by: Contact Phone:		Email		Dat	e:
		Email		Dat	e:
Contact Phone:			tion Authority	Dat	e:
Contact Phone: SECTION B:		completed by the Civil Aviat	tion Authority	Dat	e:
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