|  |  |
| --- | --- |
|  | 24137-01AMENDMENT Part 137 agricultural aircraft operator certificate application for amendment  Use this form to apply for an **amendment** of a certificate under the:   * [Civil Aviation Act 1990](file:///C:\Users\sarah.mehrtens\AppData\Roaming\OpenText\OTEdit\infohub_aviation_govt_nz-otcs\c57488648\requiring%20CAA’s%20prior%20acceptance%20or%20approval__), s 8 application for aviation document and s 9 grant or renewal of aviation document * [Civil Aviation Rules](https://www.aviation.govt.nz/rules/), Part 137 agricultural aircraft operations, if the proposed amendment:   + makes the information in your certificate application for issue or last application for renewal out-of-date under rule 137.209(1)   + affects your approval specifications   + requires CAA’s prior acceptance under rule 137.209(2). |

# You need to apply early because our assessment takes time

|  |  |
| --- | --- |
| To apply, email to [certification@caa.govt.nz](mailto:certification@caa.govt.nz) | * This application form with the completed relevant sections for proposed amendments * The relevant completed documents as set out in **section 16** of this form |

# About your application and our assessment

|  |  |
| --- | --- |
| * We’ll *only* start our assessment once yourapplication is complete * How long our assessment takes depends on the complexity of your operation and accuracy of the information you provide * No payment is required when you apply. We’ll invoice you during and at the end of the assessment for CAA’s hours taken at the [CAA standard hourly rate](https://www.aviation.govt.nz/about-us/what-we-do/how-we-are-funded/fees-levies-and-charges/) * **If your certificate is due to expire**, instead of completing this form consider including the amendment as part of your renewal application | * See section 8(b) about senior persons fit and proper person requirements (Note: The government agency reports can take 8 weeks or more to get) * Click in the field areas and type (they expand as you type) * Click on square boxes to select * To add rows to tables in this form copy and paste the last row |

# Organisation’s details You mustcomplete this section. Click on the field areas and type (they expand as you type).

If your organisation is a registered company, incorporated society, or limited partnership, and the organisation’s legal name has changed, you must email us the current Companies Office certificate of incorporation.

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Organisation’s legal name [i](#_top) | |  | | | | Organisation’s CAA ID no. | |  |
| Organisation’s trading names |  | |  |  | NZBN or N/A | |  | |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Contact person for this application | | | | | | | |
| Name |  | | | Position title |  | | |
| Mobile |  | Email |  | | | Their CAA ID no. or N/A |  |

# Organisation’s contact information *Only* fill in this section if there are changes to the information.

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Address for service Must be a physical address in New Zealand (not a PO Box) [i](#i4) | | | | | | | | Postal address If different from address for service (can be a PO Box) | | | |
| No. & street |  | | | | | | No. & street | |  | | |
| Suburb |  | | | | | | Suburb | |  | | |
| City/Town |  | | | | | | City/Town | |  | | |
| Postcode |  | | | | | | PO Box | |  | | |
|  | | | | | | | Postcode | |  | | |
| Email for notices and communications | | |  | | | | | | | | |
| Phone no. for general communications | | |  | | | | | | | | |
| Details for CAA invoices | | | | | | | | | | | |
| Organisation or person to be invoiced by CAA | | | | |  | | | | | | |
| Their CAA ID no. or N/A | |  | | Your reference no. or N/A | |  | | | | Phone no. for invoice enquiries |  |
| Emailforinvoices | |  | | | | | | | | | |

# Does your **organisation** have any of the following? You mustcomplete this section. Click on square boxes to select.

If you answer yesto any of the questions below, you must email us information about it with this application form.

|  |  |  |
| --- | --- | --- |
| Criminal offences [i](#_top) | Does your organisation have a conviction in the past 5 years or is presently facing charges? | Yes  No |
| Transport safety offences | Does your organisation have a conviction in the past 5 years or is presently facing charges? | Yes  No |
| Aviation documents | In the past 5 years, has your organisation had an aviation certificate application rejected, or aviation document suspended or revoked? | Yes  No |

# Bases of operation *Only* fill in this section for proposed amendments. To add rows to tables in this form copy and paste the last row.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Principal base |  | Add  Remove |  | Add  Remove |

Pilot in charge of remote base

|  |  |  |  |
| --- | --- | --- | --- |
| Pilot name | Their CAA ID no. | Remote base name | Add/remove |
|  |  |  | Add  Remove |
|  |  |  | Add  Remove |

# Types of operation *Only* fill in this section for proposed amendments.

|  |  |  |  |
| --- | --- | --- | --- |
| Aeroplane Add  Remove | Topdressing Add  Remove | Spraying Add  Remove |  |
| Helicopter Add  Remove | Topdressing Add  Remove | Spraying Add  Remove | VTA Add  Remove |

You must also email us the documented procedures for the types you select the below. Highlight or Track Change proposed amendments.

|  |  |  |
| --- | --- | --- |
| Wand spraying Add  Remove | Agricultural pilot training Add  Remove | Agricultural pilot competency checks Add  Remove |

*Only* fill in for proposed amendments for other agricultural activities you have.

|  |  |  |  |
| --- | --- | --- | --- |
|  | Add  Remove |  | Add  Remove |

# Senior persons

## Senior persons for your organisation *Only* fill in this section for proposed amendments.

If you proposed to add or amend functions and duties of your chief pilot, you must also email us a completed 24137-02 Part 137 nomination of chief pilot.

| Senior persons responsibility | Name | Position title | Their CAA ID no. | New | Amend functions and duties |
| --- | --- | --- | --- | --- | --- |
| Chief executive |  |  |  |  |  |
| Chief pilot |  |  |  |  |  |
| Person responsible for system for safety management |  |  |  |  |  |

## Senior persons fit and proper person (FPP) requirements [i](#i5)

Email us a completed FPP questionnaire or FPP declaration and the information required (whichever applies), for proposed new senior person or proposed amendment to a current senior person’s functions and duties. See the tables below about which FPP form to use and the information required. Note: The government agency reports can take 8 weeks or more to get.

Also check your proposed senior persons meet the qualifications and experience requirements of Part 137 Appendix C.

|  |  |
| --- | --- |
| **24FPP questionnaire** must be completed by a proposed senior person: | Information required |
| * who is a **new** senior person, or * if their last FPP questionnaire is dated **more** than 5 years ago, or * if their last FPP questionnaire is dated **less** than 5 years ago, but their FPP questionnaire information and required information **has** changed | * CV * Proof of identify * Proof of address for service * Criminal conviction check (Ministry of Justice) * Traffic safety offence history report (Waka Kotahi) |

|  |  |
| --- | --- |
| **24FPPDEC declaration** is completed by a proposed senior person if their last FPP questionnaire is dated **less** than 5 years ago, and the FPP questionnaire information and required information **hasn’t** changed, **AND** either: [i](#_top) | Information required |
| * there’s **no change** to their functions and duties, or | N/A |
| * you propose to **amend** their functions and duties | * Updated CV |

## Senior persons proposed to remove*Only* fill in this section if you propose to remove a senior person.

| Name | Position title | Their CAA ID no. |  | Name | Position title | Their CAA ID no. |
| --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |  |

# Aircraft used in your operation *Only* fill in this section for proposed amendments.

Questions about leases and lawful possession in the table below relate to Part 47 aircraft registration and marking. If your organisation is *not* lawfully entitled to possession, then your operation of the aircraft must not exceed 27 days. Once that ends, you must either enter another lease not exceeding 27 days or apply to have the aircraft registration changed to show your organisation as having lawful possession.

Note: If the aircraft on lease is listed in your operations specifications, then you don’t have to re-apply to operate the aircraft each time you lease the aircraft for a period not exceeding 27 days.

| Aircraft type and model | Registration | Serial no. | Add/remove | Are you leasing the aircraft? | Lawfully entitled to possession? |
| --- | --- | --- | --- | --- | --- |
|  |  |  | Add  Remove | Yes  No  N/A | Yes  No  N/A |
|  |  |  | Add  Remove | Yes  No  N/A | Yes  No  N/A |
|  |  |  | Add  Remove | Yes  No  N/A | Yes  No  N/A |
|  |  |  | Add  Remove | Yes  No  N/A | Yes  No  N/A |

# CAA-certified maintenance organisation/licensed engineer *Only* fill in this section for proposed amendments.

You can *only* use Part 145 CAA-certified maintenance organisations (see the list on our website) or Part 66 licensed engineers.

You must complete the table below for an aircraft you propose to add even if it’s the same type as others you operate using a current CAA-certified maintenance organisation/licensed engineer, or you’re leasing and not entitled to lawful possession of the aircraft.

| Aircraft registration | Maintenance organisation/licensed engineer name | Their CAA ID no. | Current | Add | Remove |
| --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |
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# Maintenance programme *Only* fill in this section for proposed amendments.

You must complete the table below for an aircraft you propose to add even if it’s the same type as others you operate under a current maintenance programme, or you’re leasing and not entitled to lawful possession of the aircraft.

| Aircraft registration | Maintenance programme name | Their CAA ID no. | Current | Add | Remove |
| --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |
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# CAA-certified training and competency checks organisation *Only* fill in this section for proposed amendments.

You must use a Part 141 CAA-certified training organisation (see the list on our website) or organisation certified to do training or competency checks under Part 61.

| Training/competency check organisation | Their CAA ID no. | Add/remove |
| --- | --- | --- |
|  |  | Add  Remove |
|  |  | Add  Remove |
|  |  | Add  Remove |
|  |  | Add  Remove |

# Operator safety management documentation You mustcomplete this section.

Attached to the email with this application is your (SELECT ONE):

Proposed safety management sections amended (if one document). Highlight or Track Change proposed amendments

Proposed safety management documents amended (if separate documents). Highlight or Track Change proposed amendments

*Only* complete the table below for proposed amendments that:

* make the information in your certificate application for issue or last application for renewal out-of-date under rule 137.209(1)
* affect your organisation’s approval specifications
* require CAA’s prior acceptance under rule 137.209(2).

Note:

1. You can use 24137-07 Part 137 safety management documentation amendment summary sheet to assess if your proposed amendments affect your approval specifications or require CAA’s prior acceptance.
2. Your safety management documentation (which can be one document or several documents), sets out the information required by rule 137.160, including for your system of safety management under rule 100.3. Read advisory circular AC100-1 safety management.

| Section **amended** name (if one document) or document **amended** name (if separate documents) | Version no. | Amendment no. | Revision date |
| --- | --- | --- | --- |
|  |  |  | Click or tap to enter a date. |
|  |  |  | Click or tap to enter a date. |
|  |  |  | Click or tap to enter a date. |
|  |  |  | Click or tap to enter a date. |
|  |  |  | Click or tap to enter a date. |

# Other rulesspecific to your type of operation\* *Only* fill in this section for proposed amendments for other rules not included in this form.

If you’re also applying for an issue, renewal or amendment of a certificate under another Part, list the application in this table and tell us if you emailed it separately.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Rule | Proposed amendment | Documents attached to your email |  | Rule | Proposed amendment | Documents attached to your email |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |

# Completed documents *Only* select the documents in this section that apply to your type of operation.

By selecting the relevant documents below, you’re confirming the documents are complete and attached to your email with this application.

|  |
| --- |
| If your organisation is a **registered company, incorporated society, or limited partnership** (*only* if the legal name has changed)  Companies Office certificate of incorporation |
| **For each proposed new senior person or proposed amendments to duties and functions of a current senior person**, either a 24FPP questionnaire, or 24FPPDEC declaration, and information required  Chief executive  Person responsible for system for safety management  Chief pilot AND  24137-02 Part 137 nomination of chief pilot |
| **Types of operation** (*only* if you propose amendments and highlight or Track Change)  Documented procedures for:  Wand spraying  Agricultural pilot training  Agricultural pilot competency checks |
| **Operator safety management documentation** (highlight or Track Change)  Proposed safety management documentation  Application for approval of SMS implementation |

# Declaration by chief executive or authorised officer/representative You mustcomplete this section.

1. I confirm in relation to this application:

* I have read and understood the applicable Civil Aviation Rules
* on behalf of the organisation, that the activities can be financed and carried out in accordance with s 12 Civil Aviation Act 1990 (general requirements for participants in the civil aviation system), including the provision of training and supervision to all employees
* the organisation or person set out in the ‘details for CAA invoices’ section of this form is aware that they are required to pay the invoice(s) from CAA.

1. I declare to the best of my knowledge that the information in this application and applicable documents is complete and correct.

Note:Under s 49 Civil Aviation Act 1990, communicating false information or failing to disclose information relevant to granting or holding of aviation document is an offence and liable on conviction, in the case of an individual, to imprisonment for a term not exceeding 12 months or a fine not exceeding $10,000; and a body corporate, to a fine not exceeding $50,000.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Full name |  | | Position title |  | |
| Their CAA ID no. or N/A |  | |  | Application date | Click or tap to enter a date. |
|  | | Electronic signature  **To add your electronic signature**:   1. Right click on the X in the signature box 2. Select **Sign** from the drop-down list 3. Follow the instructions to sign | | |  |