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### Download this form before you begin

Please download and complete with Adobe Acrobat. If you are using a browser to complete this form you may lose your information. Send this form and any attachments to [regservices@casa.gov.au](mailto:regservices@casa.gov.au).

### Purpose of this form

Use this form to apply for an initial issue, renewal of, or changes to an Air Operator Certificate (AOC) for Aerial Application operations.

This form applies to Aerial Application operations using **Aeroplanes** only.

If you want to operate rotorcraft in Aerial Application operations, a Part 138 aerial work certificate is required. For full details, please refer to the [CASA website](#) and complete a [Part 138 Application Form](#).

### Who is this form for?

This form is for individuals or organisations who wish to apply to conduct, renew or make changes to their Part 137 AOC for Aerial Application operations.

This form is for individuals or organisations who wish to apply to become a carrier of dangerous goods cargo (CASR Part 92). See the full details on the [carriage of dangerous goods](#).

### Information needed to complete this form

Current or proposed AOC Aerial Application operators should review CASR Part 137 before completing this form.

You must provide a Drug and Alcohol Management Plan (DAMP). If your organisation employs 10 or less Safety Sensitive Aviation Activity (SSAA) employees, you can access the Micro DAMP. See the full details on [DAMPs](#).

After receiving a completed application form, CASA will calculate and send you a cost estimate for the processing of your application and a list of any additional supporting documents required. You will need to pay the estimate and send additional supporting documentation with your payment before any assessment of your application occurs.

### Aviation Reference Number (ARN)

An ARN is required to complete this form. If you do not have an ARN, [apply now](#).

If you are applying on behalf of an organisation, you will need to have authority to act on the entity's (applicant's) behalf and be able to provide the organisation's ARN.

### Contact details

It is important the contact details on the ARN profile are current. CASA uses these contact details when processing this application.

If your address, contact or other details have changed, you must update them prior to lodging this form. You can do this by [changing your details](#) on the CASA website.

Failure to provide up to date contact details to CASA could result in additional fees being charged under the *Civil Aviation (Fees) Regulations 1995* and may constitute a criminal offence.

### For more information

Go to the [CASA website](#) or [contact us](#).

## Applicant

### 1 What are the **applicant** details?

Your contact details must be current. Update your contact details via [changing your details](#).

Legal entity/full name

ARN

ABN/ACN (if applicable)

Phone number

Email address

### 2 If the organisation is a company, is it registered in Australia?

**No** → [Go to 3](#)

**Yes** → [Go to 4](#)

### 3 Where was the organisation incorporated?

### 4 Do you want to add or remove a **registered business name** to/from the certificate?

You can request a registered business name to be included on your certificate. The name must meet the following criteria, otherwise the certificate will be issued with only the name provided in question 1:

- Its registration must be current at the time of issue of the certificate; and
- It must be registered only under the name of the proposed certificate holder (as proprietor) at the time of issue of the certificate.

**No** → [Go to 6](#)

**Add new** → [Go to 5](#)

**Remove existing** → [Go to 5](#)

### 5 What is the **registered business name** to be added or removed?

Business name

Registration number

 Attach additional pages if required

### 6 If a corporation, what are the names of **all** corporate officers in your organisation?

Refer to section 9 of the Corporations Act 2001

## Contact person

### 7 What are the **contact person** details?

Contact details will be used for this application only, including any questions and/or fee estimates.

Full name

Position (Agent, Secretary)

Phone number

Email address

### 8 What are you applying for? (Select one)

Initial Issue → [Go to 9](#)

AOC Variation → [Go to 9](#)

Other Amendments to the Operations Manual or the Schedule of Differences → [Go to 30](#)

Renewal → [Go to 31](#)

## Key personnel

You must ensure for each key personnel position nominated you attach evidence of the qualifications and experience for each nominated person.

**Initial issue:** Complete key personnel sections applicable to your operation

**Variation to key personnel:** Only complete the sections of the position(s) that are changing

**Variations with no change to key personnel:** Go to 13

**Standby Key Personnel:** If you wish to nominate standby key personnel for your organisation, please attach additional pages specifying - position, full name, ARN, phone number and email address of the person nominated. Include evidence of qualifications and experience for each person nominated.

### 9 Please provide the details of the **Chief Executive Officer**

Full name

ARN

Phone number

Email address

 Attach qualifications and experience

### 10 Please provide the details of the **Head of Flight Operations**

Full name

ARN

Phone number

Email address

 Attach qualifications and experience


### 11 Please provide the details of the **Head of Aeroplane Maintenance Control**

Full name

ARN

Phone number

Email address

 Attach qualifications and experience

## Aerial Application Operations

### 12 Are you intending to **add or remove a type/category** of aircraft to your operations?

Please list only **fixed wing** aircraft in this section that you are intending to operate in Aerial Application operations under CASR Part 137.

If you are applying for a certificate to operate **rotary wing** aircraft in Aerial Application operations, please complete a Part 138 Application Form for a Part 138 Aerial Work certificate.

If applying for a **variation**, only list aircraft type/categories you want added and not already approved on your AOC.

**No** ➔ [Go to 14](#)

**Add new** ➔ [Go to 13](#)

**Remove existing** ➔ [Go to 13](#)

### 13 What **type/category of aircraft** to be added or removed?

Single engine piston aeroplanes

Single engine turbine aeroplanes

Other aircraft as listed:

## Main Operating Bases

### 14 Is the address of your **operations headquarters** where you propose to conduct your Aerial Application activities different to your mailing address?

**No** ➔ [Go to 15](#)

**Yes** Please enter the new address below:

## 14 Continued

Unit/number

Street name

Suburb

State/territory

Postcode

Country (if not Australia)

- 15** Are you intending to **add or remove any operating bases** where you propose to conduct or are currently conducting your Aerial Application activities?

**Initial issue** applicants must provide details for all applicable locations as required.

- No** ➔ [Go to 17](#)  
**Add new** ➔ [Go to 16](#)  
**Remove existing** ➔ [Go to 16](#)

- 16** What is the **address of the operating bases** to be added or removed?

Unit/number

Street name

Suburb

State/territory

Postcode

Country (if not Australia)

 Attach additional pages if adding or removing multiple operating bases

## Drug and Alcohol Management Plan (DAMP)


An organisation that has an employee or contractor (including the employee of, or subcontractor for, the contractor) who performs or is available to perform Safety Sensitive Aviation Activities (SSAA) **is required to have a DAMP**.

However, if your organisation will not have more than ten (10) regular SSAA employees, you may instead use a CASA Micro-business DAMP.

Further information on DAMPs can be found on the [DAMP home page](#). The [DAMP Micro Business information page](#) provides more information on who is eligible to use the CASA Micro-business DAMP.

- 17** Are you proposing to use the **CASA Micro-business DAMP** because you meet the eligibility requirements?

**No**

 Attach your DAMP manual

**Yes** ➔ [Go to 18](#)

## Corporation and bankruptcy actions

**Initial issue or Variation to key personnel:** Complete this question.

**Variations with no change to key personnel:** Go to 23

- 18** Has the applicant or any of the applicants key personnel been **declared bankrupt** in Australia or a foreign country in the last 10 years?

**No**

**Yes**

- 19** Has the applicant or any of the applicants key personnel been a director or held a key personnel position within an Australian or foreign corporation in the last 10 years where the corporation was charged with or convicted of any **criminal offence**?

**No**

**Yes**

- 20** Has the applicant or any of the applicants key personnel been a director or held a key personnel position within an Australian or foreign corporation in the last 10 years where the corporation was declared **bankrupt, insolvent** or placed in **receivership**?

**No**

**Yes**

**21** Has the applicant or any of the applicants key personnel been a director or held a key personnel position within an Australian or foreign corporation in the last 10 years where the corporation was subject to **investigation** or **comment** by any share dealings or financial affairs regulatory body?


**No**

**Yes**

**22** If you answered **yes** to **any** of questions 18 to 21, you must provide details below:

Include names, dates, charges laid, present status, and the penalty imposed.

Refer to CASR 11.055 and Aviation Transport Security Regulations 2005, regulations 6.55 and 6.59

 Attach additional pages if required

## Nominated personnel history

**23** Has any action been taken against you or any of your nominated personnel; or is any action in the process of being taken against you or any of your nominated personnel; or have you or any of your nominated personnel been refused the issue of any aviation related licence, certificate, rating, or authority by an organisation?

You are required to disclose any matters, both in Australia and overseas, relating to the fitness of your nominated personnel to hold an authorisation. This includes matters bearing on the suitability of a nominated person to hold a nominated position.

**No**

**Yes**

**24** Have you or any of your nominated personnel ever been refused the issue of a transport related licence or certificate (e.g. pilot licence, pilot certificate, drivers licence, boating licence)?

**No**

**Yes**

**25** Do you or any of your nominated personnel have any criminal conviction or finding of guilt, which is less than ten years old, or any juvenile criminal conviction or finding of guilt, which is less than five years old?

Include all motor vehicle traffic-related convictions including those from overseas.

**No**

**Yes**

**26** Is suspension or cancellation action pending in relation to any aviation licence you or any of your nominated personnel hold?


**No**

**Yes**

**27** If you answered **yes** to **any** of questions 23 to 26, you must provide details below:

Include dates, actions, charges, convictions and imprisonment in Australia and overseas.

Refer to CASR 11.055 and Aviation Transport Security Regulations 2005, regulations 6.55 and 6.59

 Attach additional pages if required

**28** Do you agree to the publication of details of your Air Operator's Certificate on the CASA website?

**No**

**Yes**

**29** Are you submitting a **Standard Operations Manual** and accompanying **Schedule of Differences** with this application?

**No** → [Go to 31](#)

**Yes** → [Go to 31](#)

 Attach Standard Operations Manual and Schedule of Differences

## Other Amendments to the Operations Manual or the Schedule of Differences

**30** Provide **details of amendments** made to the Operations Manual or a Schedule of Differences to the Standard Operations Manual

 Attach additional pages if required

 Attach Operations Manual and/or Schedule of Differences

*This area has been intentionally left blank*

## Applicant checklist

**31** Select all that apply:

Additional registered business name(s) to be added or removed

For initial issue or change to key personnel; attached the required evidence of qualifications and experience

Additional operating base address(es) to be added or removed

I have attached a copy of my Drug and Alcohol Management Plan (DAMP) if required to have one

Additional corporation and bankruptcy actions information

Additional nominated personnel history information

Standard Operations Manual with Schedule of Differences

Additional information on Other Amendments to the Operations Manual or the Schedule of Differences

Operations Manual and/or Schedule of Differences

Declaration authority

*This area has been intentionally left blank*

### 32 I declare:

- All statements in this notice are true and correct.

I acknowledge by providing my details below and submitting this application:

- I may commit an offence under the *Criminal Code Act 1995* if I make a false or misleading statement in my application.
- We may also use your licensing information in deidentified form for aviation safety research/analysis.
- I have used my best efforts to identify all Commonwealth, state and territory environmental protection legislation that governs the aviation-related activities I will be engaging in under the authorisation for which I am applying. I recognise and understand these obligations and will endeavour in good faith to comply with the applicable requirements specified in that legislation.

#### Privacy

Any personal information you provide to CASA, as part of this application, is protected by the *Privacy Act 1988*.

We will use the information provided to process this application and may also use it to conduct identity/security checks. Without your consent, we may not be able to process your application.

To meet our accountability obligations, we may disclose this information:

- to other government agencies or other national aviation authorities for certain purposes, and
- to comply with court orders and other legal requirements.

For more information about how we use, disclose and protect your personal information, see our [privacy statement](#) and [privacy policy](#).

#### Fees

I acknowledge CASA will provide a fee estimate, which will be sent to the contact for this application.

I accept if this application is withdrawn or refused by CASA, or if CASA is unable to assess this application because I have failed to provide the required information and/or documentation, I am liable to pay CASA fees for work conducted.

- I declare and acknowledge the above matters.
- I consent to CASA using my licensing information and other personal information for the above purposes.
- I have read CASA's privacy policy and I authorise CASA to use and disclose the information it collects for this application in accordance with that policy.

### Declaration continued

Full name

Signature

Date (DD/MM/YYYY)

/ /

### Role authority

#### 33 In what capacity are you making this declaration?

Chief Executive Officer

Agent

Other, please specify:

An authority must be provided if the person making this declaration is **not** the individual or an office holder of the entity named in question 1.

 Attach authority

### Submitting this form to CASA



By email – send this form with all supporting documents attached to [regservices@casa.gov.au](mailto:regservices@casa.gov.au)