



# Aircraft Type Rating on an Aircraft Engineer Licence

Australian Defence Force (ADF) Qualifications

CASR 66.075



## 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 [ame.licensing@casa.gov.au](mailto:ame.licensing@casa.gov.au).

## Purpose of this form

Use this form to apply for additional privileges on your Australian Aircraft Maintenance Engineer Licence, based on Defence Force Aircraft Authorisations.

## Who is this form for?

This form is for individuals applying for additional aircraft type ratings on their aircraft maintenance licence via Defence Force Authorisations.

## Information needed to complete this form

You must be licensed within the applicable Category for which you seek an Aircraft Type Rating before submitting this application OR be submitting Form 542 at the same time.

This form is not for recognising ratings based on civil qualifications, whether Australian or foreign.

If you are applying for additional Ratings based on civil qualifications, you must submit –

- Form 541 (ACQ) – for recognising Australian civil qualifications, or
- Form 545 (FCQ) – for recognising foreign civil qualifications.

You can pay for this application online. Go to the CASA webpage and click the Payment button. You must provide a receipt with this application.

Please ensure your application and the checklist are completed correctly, and that all required supporting documentation is provided. Incomplete applications will not be accepted and may be returned to you for amendment.

## 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 contact details via [changing your details](#).

Full name

ARN

Phone number

Email address

Australian CASR Part 66 Licence

2

Do you hold an Australian CASR Part 66 Licence in the category/subcategory applicable to the Aircraft Type Rating?

No

Applying for category at the same time. See Form 542.

No

Application will be refused. You must hold an Australian CASR Part 66 Licence in the relevant category, or be applying for the category together with the rating.

Yes

Please attach the following documentation:

Certified true copy of your Defence Force aircraft authorisations, endorsed with the Defence Force Aircraft Type Ratings.

Evidence of exercising the privileges of the authorisations for at least 6 months in the 2 years immediately before making this application.

Medically significant conditions


3

Do you have a medically significant condition (as described in CASR 67.010) that is safety-relevant?

No

Yes

Attach medical report, if not previously supplied

 Provide medical report

Validity of qualifications

4

Are you still a serving member of the Australian Defence Force?

No

Please attach a certified true copy of your discharge certificate.

Yes

Please attach a certified true copy of a letter from your Commanding Officer or Engineering Officer providing evidence of the validity for the Aircraft Type ratings relevant to this application.

Note:

The applicant must have exercised the privileges under the licence or authorisation for at least 6 months in the 2 years immediately before making this application.

Aircraft type ratings

5

What additional aircraft type ratings are you applying for (if any)?  
Enter Aircraft Type Ratings, as listed in Part 66 MOS Appendix IX, against each category/subcategory, as appropriate.

Note:

Aircraft Type Ratings may only be applied to Categories/subcategories B1.1, B1.3 and B2.

Category/ subcategory	Aircraft Type Rating

Applicant checklist

6

Select/specify attachments:

Certified true copy of ADF Discharge certificate OR letter from CO/EO is attached.

Certified true copies of Copy of ADF authorisations (Record of Training and Employment) is attached.

Report from medical practitioner detailing all medically significant conditions attached (if required)

If other please specify

## 7 I declare:

- All statements in this application 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 attached all required documentation specified in the application checklist.

### 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 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.

Full name

Signature

Date (DD/MM/YYYY)

/ /

## Submitting this form to CASA

Choose one option only



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



By post – return this form and all supporting documents to:

**CASA Client Services Centre**  
**GPO Box 2005**  
**Canberra ACT 2601**

↓ [Continue to payment page](#)



## 8 Application fees

Grant of 1 or more ratings on an Aircraft Engineer Licence (AEL) upon CASA assessment of fully or partially equivalent foreign or Defence Force rating — processing and consideration of application (per category)

**Fee Code: 2.39.....\$260 / Category**

Categories X

**For example:** If an applicant applies for ratings against Category B1 and B2, the total cost is \$520.

**Total:**

## 9 Payment options

### OPTION 1 Online payment

### Make a secure payment online >

Online payments are more secure and also enable CASA to process your request faster. To make a payment go to [Secure payment gateway](#). After making a payment, enter the online receipt number below.

Provide the online receipt number below:

### OPTION 2 Credit card

I hereby authorise the Civil Aviation Safety Authority to **debit** the following amount from:

Mastercard

Visa

Total \$

Card number

Expiry (MM/YY)

/

Cardholder name

Signature

Date (DD/MM/YYYY)

/

/

**Receipt options**

Applicant

**or**

Third party (provide details below)

#### Details of third party

ARN (If applicable)

Email

Legal Entity/ Full name

Phone number