



CASA Stamp:

IMPORTANT INFORMATION FOR APPLICANTS

- 1: You must be licensed within the applicable Category for which you seek an Aircraft Type Rating before submitting this application **OR** be submitting [Form 540](#) at the same time.
- 2: If you are applying for additional Ratings based on Australian Defence Force or Foreign qualifications, you must submit [Form 543](#) (ADF) or [Form 545](#) (Foreign). **DO NOT SUBMIT THIS FORM.**
- 3: Payment for this application can be made [online](#).
- 4: This form can be completed electronically and saved locally to your computer. Once the ARN has been entered into the first page, it will automatically update in the applicant ARN fields on subsequent pages. CASA recommends that applicants complete as much of the form electronically as possible.
- 5: 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. **Fields and sections marked with an * are mandatory.**

Applicant Details as per Birth Certificate / Passport:

Title*: _____
 Family Name*: _____
 Given Names*: _____
 Date of Birth*: _____

Applicant ARN:*

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CONTACT DETAILS

You are required to notify of any changes to your personal contact information (refer to [CASR 11.70](#)), information on how to change your contact details is available on CASA website <https://www.casa.gov.au/services/standard-page/changing-your-details>. All correspondence, including permissions issued as a result of this application, will be sent by email or post to your current contact details according to CASA's records.

Privacy Statement: Any personal information you provide to CASA is protected by the *Privacy Act 1988* (Cth). CASA can only collect, use and disclose that information in accordance with that Act. CASA will use the information collected in this form for purposes associated with performing its functions under the *Civil Aviation Act 1988*, the *Airspace Act 2007*, the *Aviation Transport Security Act 2004* or the regulations made under those Acts. For full details on how CASA collects, protects and uses personal information, please refer to [CASA's Privacy Policy](#).

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Section A: Eligibility Criteria*

1. Qualifications and Experience Refer to CASR 66.080

You must be assessed as competent for meeting the relevant theory and practical requirements for the Aircraft Type Rating(s) relevant to this application, before submitting this application. Your application will be refused unless the appropriate documentation is attached to this application.

Where did you complete your aircraft training and assessment?

Part 145 Approved Maintenance Organisation

You must attach the completed Form 465 to this application in relation to the Aircraft Type Rating(s), in accordance with CASR 66.080(3)a.

Part 147 Maintenance Training Organisation

You must attach the completed Form 465 to this application, in accordance with CASR 66.080(2)a.

2. Australian CASR Part 66 Licence

Do you hold an Australian CASR Part 66 Licence in the related Category/Subcategory, for which the Aircraft Type Ratings will apply?

Yes

No – Applying for category at the same time, see Form 540.

No – Application will be refused. You must hold an Australian CASR Part 66 Licence in the relevant Category or be applying for the Category prior to applying for Aircraft Type Ratings.

3. Medically Significant Conditions Refer to CASR 66.080(1)

Note: In accordance with CASR Part 11, if you have previously supplied documentation, you are not required to submit it again.

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

Yes – Please attach a report from a medical practitioner that describes the condition.

Yes – I have previously submitted documentation to CASA MPL and received acknowledgement of receipt by CASA. Date submitted: ___ / ___ / ___

No

Section B: Application Details*

1. Aircraft Type Ratings

Enter Aircraft Type Ratings, as listed in Appendix IX of the Part 66 MOS, against each Category/subcategory, that you are applying for (attach separate page if required)

Note: Aircraft Type Ratings may only be applied to Categories/subcategories B1.1, B1.2, B1.3, B2 and C.

Category/Subcategory	Aircraft Type Rating(s)

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2. On-the-Job Training

2.1 Are you applying for the first Aircraft Type Rating in a Category?

- Yes – Proceed to Question 2.2.
- No – Proceed to Question 3.

2.2 Have you completed On-the-Job Training?

Refer to section 66.A.55 of the Manual of Standards and the Acceptable Means of Compliance, available on the CASA website.

- Yes – Please attach evidence of completing On-the-Job Training, relevant to the Aircraft Type Rating on Form 465.
- No – If the application is for the first rating in the Category and the same type is not held in another Category, the application will be refused.

3. Maintenance Experience and Employment History Relevant to this Application* Refer to CASR 66.080(2)

An applicant for a Type Rating must be able to demonstrate:

1. Within the 5 years immediately before the time of making the application, they have successfully completed:
 - (i) the theoretical elements of the aircraft type training for the rating; and
 - (ii) the assessment for the training; and
2. Within 2 years immediately before the time of making the application, they have successfully completed:
 - (i) the practical elements of the aircraft type training for the rating; and
 - (ii) the assessment for the training.

Do you comply with the regulatory requirements stated above?

- Yes
- No – Your application will be refused.

Other Experience and Employment (if applicable) Attach a separate page if insufficient space.

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Section C: Applicant Checklist * Enter 'Y' or 'N' in applicable boxes

	Copy of Form 465 from MTO / AMO attached
	Evidence of on-the-job training attached (only applicable to first Rating in a Category)
	Report from medical practitioner detailing all medically significant conditions attached OR Not applicable
	Application form signed and fully completed (including ARN entered on each page)
	Payment made online and receipt attached OR Payment Authorisation completed (cheque or money order attached if applicable)

Section D: Applicant Declaration*

I hereby certify that all statements in this application are true and correct in every particular and that I have read and understood all regulatory references included in this application. I consent to CASA using and disclosing my personal information in accordance with CASA's privacy policy including exchanging the information with Commonwealth, State and Territory government agencies (see [CASA's Privacy Policy](#)). I have attached all required documentation specified in the applicant checklist and acknowledge that to knowingly make a false statement is an offence against the *Criminal Code Act 1995* (Cth).

Signature: _____

Date: ____ / ____ / ____

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Payment Authorisation

Application Fees*

Fee Code	Description	Total
<input type="checkbox"/> 2.37	Grant of one or more ratings on an Aircraft Engineer Licence (AEL) upon successful completion of aircraft type training and assessment by MTO - processing and consideration of application (per category) Categories x _____ * (\$195/Category)	\$ _____
<input type="checkbox"/> 2.38	Grant of one or more ratings on an Aircraft Engineer Licence (AEL) upon training, assessment and experience provided by Part 145 organisations - processing and consideration of application (per category) Categories x _____ * (\$195/Category)	\$ _____
Total Cost:		\$ _____

Payment Options *

- Payment made [online](#) Receipt No: _____ (CASA preferred option)
Attach printed receipt and do not complete remainder of this page
- I have enclosed a Cheque or Australian Money Order (please make cheques payable to CASA)
- I am paying by credit card (provide details below)

I hereby authorise the Civil Aviation Safety Authority to debit the following amount from my: MasterCard <input type="checkbox"/> Visa <input type="checkbox"/>											
Card Number: <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table>											Expiry Date: ____ / ____
Card Holder Name (please print):	Total: \$ _____										
Signature:	Date: ____ / ____ / ____										

Receipt Options *

Send receipt to:

- Applicant OR Third party (provide details below)

Details of Third Party

Individual's or Organisation's Full Name:		
Email:		
Postal Address:		
State:	Postcode:	Country:
Contact Phone:	ARN: (if applicable)	

Submit the Payment Authorisation Form (and Cheque / Money Order / Purchase Order) with the Application Form.

- **Email** ame.licensing@casa.gov.au
- **Mail to:** CASA Licensing and Registration Centre
CASA
GPO Box 2005
CANBERRA ACT 2601

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Receipt No:		Initial:	
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