



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 [Privacy statement | Civil Aviation Safety Authority \(casa.gov.au\)](https://www.casa.gov.au/privacy-statement).

Part A – Details of the Applicant*

If you are filling in the form by hand, print neatly with a black or blue ballpoint pen. Some questions contain check boxes. Please mark where appropriate. It is in your interest to ensure that the information you provide is both accurate and complete. This information is used in the calculation of a cost estimate for the assessment of your application. It is an offence to make false declaration.

For guidelines on how to complete this form see CASA website.

A1 Organisation's Details

Legal entity (organisation or individual)		ARN	
Approval Certificate Number (variation only)			
ACN/ABN/ARBN or Foreign Company Registration			
Contact Name (in full)			
Phone		Email	
Mobile		Fax	

Part B – Application Type*

B1 Indicate which of the following applies to you:

For definition of Part 147 significant or non-significant change see [CASR 147.010](https://www.casa.gov.au/casr-147-010)

- | | |
|--|---|
| <input type="checkbox"/> Significant Change
(You will receive an Estimate of Costs) | <input type="checkbox"/> Non-significant Change Notification
(This notification is not chargeable) |
|--|---|

B2 Indicate which of the following applies to you:

- | | |
|---|--|
| <input type="checkbox"/> Initial | <input type="checkbox"/> Surrender of Approval |
| <input type="checkbox"/> MTOE Change | <input type="checkbox"/> Course removal |
| <input type="checkbox"/> Course Approvals | |

**Application for a Part 147
Maintenance Training Organisation -
Initial Approval or Change**

Form 547

B3 Address of the proposed main location/location change	
Address of the proposed main location (Each address of other proposed location(s) may be detailed within System or Quality Control/Procedures Manual)	
B4 Proposed Course Details (if applicable)	
<input type="checkbox"/> Category:	<input type="checkbox"/> Aircraft Type:
B5 Proposed Training Details (if applicable)	
<input type="checkbox"/> Category training and assessment <input type="checkbox"/> A1 <input type="checkbox"/> A2 <input type="checkbox"/> A3 <input type="checkbox"/> A4 <input type="checkbox"/> B1.1 <input type="checkbox"/> B1.2 <input type="checkbox"/> B1.3 <input type="checkbox"/> B1.4 <input type="checkbox"/> B2 <input type="checkbox"/> RPL	
B6 Details of Change	
Provide details proposed changes to the Exposition/addition or removal of courses and attach all documents	

**Application for a Part 147
Maintenance Training Organisation -
Initial Approval or Change**

Form 547

B7 List of Supporting Documentation	
CASA requires details of the organisation's exposition, course plans (including durations) and data access. The exposition would cover the subjects of facilities, student numbers, personnel, staff records, instructional equipment, samples of maintenance training material, student records and quality management system	
1.	
2.	
3.	
4.	
5.	
6.	
7.	
8.	
9.	
10.	
11.	
12.	
13.	

Part C – Submission Checklist	
CASA requires the following Supporting Documentation to assist your application.	
I have attached evidence for the following :	
Form 004 – Nominated Personnel (if applicable)	Yes <input type="checkbox"/>
Forms 1162 – Application for an Aviation Reference Number (ARN) (if applicable)	Yes <input type="checkbox"/>
Exposition and/or Exposition Amendments	Yes <input type="checkbox"/>
Supporting Documentation	Yes <input type="checkbox"/>

**Application for a Part 147
Maintenance Training Organisation -
Initial Approval or Change**

Form 547

Part D – Applicant’s Declaration*

Giving false or misleading information is a criminal offence under section 136.1 of the Commonwealth Criminal Code.

> I am the Accountable Manager (Part 147)

DECLARATION

1. I declare that the information provided on this form is true and correct.
2. I understand that the information provided on this application will form the basis of the calculation of the fee for processing.
3. I understand and accept that the cost estimate may change, and processing the application may be delayed if:
 - a. The application does not accurately and completely identify the requirements
 - b. The details in this application are subsequently changed, or
 - c. Adequate supporting documentation/evidence has not been provided
4. I understand and accept that for CASA to proceed with this application, I/we must:
 - a. Accept the cost estimate
 - b. Forward the prescribed payment or have a valid account with CASA; and
 - c. Supply all supporting documentation to CASA.
5. I agree to the publication of our approval on the CASA website.
6. I, the Accountable Manager, declare that the information provided in this application is made for and on behalf of the organisation identified in Part A and that I am empowered by that organisation to provide the information on their behalf and to make this declaration. I undertake to comply with the requirements of Part 147 of CASR 1998 and the Part 147 MOS if approved as a Maintenance Training Organisation. I certify that all information contained in this statement of intent is true and correct.

After reviewing your application, CASA may require you to submit additional documents to support your application.

Name*		Signature*		Date*	
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You must provide the name and signature for CASA to accept this application.

This completes your application.

What to do now

Post or email the complete set of documents to CASA using one or a combination of the following, as appropriate:

Postal address	Civil Aviation Safety Authority Maintenance Personnel Licencing Services Team GPO Box 2005 CANBERRA ACT 2601
Email	Part147.MTO@casa.gov.au