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OR



### 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 an:

- Initial Australian Aircraft Maintenance Engineer Licence based on Australian Defence Force (ADF) Qualifications
- Additional category or subcategory based on Australian Defence Force (ADF) Qualifications, or
- To apply for a modular licence based on Australian Defence Force (ADF) Qualifications.

## Who is this form for?

This form is for individuals holding an Australian Defence Force licence where the applicants ADF qualifications has been assessed by a CASA approved Part 147 Maintenance Training Organisation (MTO).

Your ADF qualifications must have been assessed by a Maintenance Training Organisation (MTO) before you submit this form. You must obtain a copy of Form 465, completed by the MTO or the Document of Record (DOR) received from CASA, and submit it with this application.

If you are also applying for Aircraft Type Ratings, based on ADF authorisations, you must submit Form 543 with this application.

This form is not for if you are applying for:

- An initial issue of your CASR Part 66 Licence based on Australian Civil or Foreign qualifications. Use Form 540 (Civil) or Form 544 (Foreign), or
- If you have undertaken self-study and completed the CASA Part 66 Practical Experience Logbook.

## Information needed to complete this form

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.

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](#).

## 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

Phone number


Email address

## Proof of identity

### 2 Have you attached your proof of identity? It must demonstrate proof of age, identity and nationality.

**No** This application will be refused.

**Yes**

 Provide certified true copies

## 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 and authorisations previously held.

**Yes** Please attach a certified true copy of a letter from your Commanding Officer or Engineering Officer providing evidence of the validity of your authorisations.

In accordance with *Civil Aviation Safety Regulation 66.070*, CASA must be satisfied that your authorisations were not cancelled or revoked. Please be sure to provide any documentation that supports this requirement.

## ADF Aircraft Authorisations

### 5 Have your Defence Force aircraft authorisations been assessed by a Maintenance Training Organisation (MTO)?

**No** Application will be refused. You must be assessed as competent by a Maintenance Training Organisation prior to applying for your licence.

**Yes** Please attach the following documentation:

- Copy of Form 465 from an approved Maintenance Training Organisation (MTO) or the Document of Record (DOR) received from CASA.
- Certified true copy of your Defence Force aircraft authorisations (Record of Training and Employment or equivalent) that provide evidence you have met one of the following requirements in the 2 years immediately before the time of making this application:
  - You have exercised the privileges for at least 6 months; OR
  - You have gained at least 6 months additional practical experience.

## Application type

### 6 What are you applying for (select one)?

- |                                 |                           |
|---------------------------------|---------------------------|
| Initial licence                 | ➔ <a href="#">Go to 7</a> |
| Additional category/subcategory | ➔ <a href="#">Go to 7</a> |
| B1 Modular licence              | ➔ <a href="#">Go to 8</a> |
| B2 Modular licence              | ➔ <a href="#">Go to 9</a> |

### 7 What category/s or subcategory/s are you applying for?

- |    |      |    |
|----|------|----|
| A1 | B1.1 | B2 |
| A2 | B1.2 |    |
| A3 | B1.3 |    |
| A4 | B1.4 |    |

**Note:** if you are applying for an A or B1 category, you must tick the relevant subcategories.

## Modular Licence

- 8** What subcategory/s of category **B1 modular licence** are you applying for?

### Category B1 modular licence

- B1.1 Airframe (Aeroplanes) systems
- B1.2 Airframe (Aeroplanes) systems
- B1.3 Airframe (Helicopters) systems
- B1.4 Airframe (Helicopters) systems
- B1.2 Powerplant (Piston) systems
- B1.4 Powerplant (Piston) systems
- B1.1 Powerplant (Turbine) systems
- B1.3 Powerplant (Turbine) systems

### Extension of Category B1 modular licence

- Electrical and instrument systems

- 9** What category/s of **B2 modular licence** are you applying for?

- Electrical systems
- Instrument systems
- Radio systems

## Aircraft Type Ratings

- 10** Are you applying for Aircraft Type Ratings based on ADF qualifications within the B Category/Subcategory specified above?

**No** ➔ [Go to 11](#)

**Yes** You must submit Form 543 Application for Aircraft Type Ratings on a CASR Part 66 Licence Assessment of ADF Qualifications with this form.

## Application Checklist

- 11** Select all that apply:

- Photo ID (if applicable) is attached
- Copy of ADF Discharge certificate OR Letter from CO/EO (certified true copy) is attached
- Completed Form 465 from MTO attached OR the Document of Record (DOR) received from CASA
- Copy of ADF authorisations (Record of Training and Employment (certified true copy)) is attached
- Report from medical practitioner detailing all medically significant conditions attached (if required)
- Copy of ADF Military Aircraft Maintenance Licence (MAML) (certified true copy) is attached

If other please specify:

## 12 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 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

### OPTION 1 By email



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

### OPTION 2 By post



Return this form and all supporting documents to:

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

↓ [Continue to payment page](#)



## 13 Application fees

Select **only one** option below

Recognition of Defence Force aircraft authorisations (current) held at time of application (based on assessment by MTO) - processing and consideration of application

**Fee Code: 2.35.....\$65**

Recognition of Defence Force aircraft authorisations (expired) held before time of application (based on assessment by MTO) - processing and consideration of application

**Fee Code: 2.36.....\$65**

**Total:**

## 14 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