



These guidelines are designed to assist you to complete the form for the approval and acceptance of nominated personnel under the approved exposition, manual of standards and the *Civil Aviation Safety Regulations 1998*.

**IMPORTANT**

It is the applicant’s responsibility to apply for CASA approval only if they have an operational requirement for the approval and can demonstrate compliance with, all the relevant regulatory requirements. Please carefully read this document and any relevant Acceptable Means of Compliance, Guidance Material or Advisory Circular issued by CASA and available on the CASA website [www.casa.gov.au](http://www.casa.gov.au).

**About this form and the application process**

**Application Process**

Completing this application form is the first step in the application process. 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. **Applicants can complete the PDF version of this application form electronically, however, the application form will need to be printed, signed and submitted to CASA by email (scanned), fax or post.**

Should you wish to formally proceed with your application, you will need to pay the cost estimate and send all supporting documentation with your payment.



**NOTE:**

CASA may refuse to consider an application or to consider it further while there are requirements that the applicant has not complied with (CASR 11.055 (1B)).

**Form 004**

Form 004 is the form approved by CASA for the nomination of key personnel. This form is considered part of an application pack and should be submitted with the appropriate application form. One (1) form must be completed for each nominated person.

This form, once filled out correctly, along with all satisfactory documentation and evidence required to support the application, addresses the requirements of the legislative provision(s).

The form is made up of four parts:

<b>Part A</b> – Details of Applicant	Parts A to D are required to be completed by the applicant.
<b>Part B</b> – Information Required under CASR 11.055	
<b>Part C</b> – Submission Checklist	
<b>Part D</b> – Applicant’s Declaration	
<b>Part E</b> – CASA USE ONLY	

**Withdrawal of Application**

You can withdraw your application in writing at any time however you will be charged for time spent on the assessment of your application up to the date of withdrawal.

We will send you an invoice or a refund as applicable.

**Part A – Details of Applicant**

**A1 – Organisation’s Details**

**Please note** that in the guidelines and application form the certificate holder is referred to as the ‘applicant’. In this section, you are required to provide the name and ARN of the legal entity with which the nominated person is associated.

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## A4 – Details of Nominated Person

You must provide the full legal name of the nominated person. This is the name that would appear on, for example, a passport or birth certificate.

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### Aviation Reference Number (ARN), if previously allocated

An Aviation Reference Number (ARN) is a CASA issued number. It is a six-digit reference number issued to individuals, companies or any legal entity that at any given time have CASA permissions or publications issued to them.

If the nominated person does not have an ARN, you must provide the following details:

- Date of birth
- Gender
- Residential address – a PO Box is not acceptable.

## Part B – Information required by under CASR 11.055

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You are required to disclose any matter relating to your fitness to hold an authorisation. This includes matters bearing on the suitability of the nominated person to hold the nominated position by reference to their knowledge, qualifications, experience and compliance history.

## Part C – Submission Checklist

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The submission checklist identifies the evidence you are required to complete and submit with this form.

## Part D – Applicant’s Declaration

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By signing the declaration, you indicate to CASA that you have:

1. read the guidelines.
2. completed the application in full.
3. accepted the terms and conditions for processing your application; and
4. agreed to the publication of your approval details on the CASA website.

The application must be signed by the nominated individual listed in section A4.

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## Privacy Policy

CASA is authorised under Subpart 11.B of the *Civil Aviation Safety Regulations 1998* (CASR) to require provision of information as listed in this form. All such information received will be treated as confidential and will not be disclosed to any third parties unless that disclosure is required or authorised by law. CASA is bound by the *Privacy Act 1988* to safeguard personal information within the terms of that Act. Please be aware that CASA policy is to publish approvals on its website.

## Submitting your application form

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Submit your application to CASA’s Permission Application Centre by email, fax or post. **If you are submitting by email, please print, sign and scan the signature page.**

By email: [regservices@casa.gov.au](mailto:regservices@casa.gov.au)

By fax: (07) 3144 7333

By post: Permission Application Centre - Brisbane

Civil Aviation Safety Authority

GPO Box 2005

Canberra ACT 2601

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**You do not need to print and submit these guidelines with your application form.**



**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 under the Commonwealth Criminal Code to make false declaration. **Questions marked with an asterisk (\*) are mandatory and must be completed.**

**Application Type\*** Indicate which of the following applies to you

Initial Nomination	Variation to Position
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**A1 - Organisation's Details\***

Name of legal entity*	ARN*
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**A2 - Approval Type\*** – Tick the appropriate box for the approval type held

CASR Part 42 CASR Subpart 21.J	CASR Part 145	CASR Part 147
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**A3 - Nominated Position\*** – Tick the appropriate box for the relevant position for which you are nominating

Accountable Manager	Responsible Manager	Continuing Airworthiness Manager
Chief Executive Officer	Safety Manager	Quality Manager
	Head of Design	

Position Title	
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**A4 - Details of Nominated Person\***

Full legal name*	ARN	
Email	Mobile	

If the nominated person does not have an ARN, the following details are mandatory.

Date of Birth	Gender	Male	Female
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Residential Address

Street				
Suburb	State	Postcode		
Country				

**A5 - Experience of Nominated Person\***

Qualifications of nominated person mentioned in A5 (attach a separate page if required)


Work experience of nominated person mentioned in A5 (attach a separate page if required)


Relevant knowledge of nominated person mentioned in A5 (attach a separate page if required)


Other CASA approvals currently held by the nominated person mentioned in A5 (include the name of the organisation) (attach a separate page if required)


**Part B – Information Required under CASR 11.055\***

*You are required to disclose any matter relating to your fitness to hold an authorisation. As noted in the guidelines this includes matters bearing on the suitability of the nominated person to hold the nominated position.*

Has any action been taken against you or is any action in the process of being taken?	Yes	No
Have you been refused the issue of a transport related licence, certificate, rating or authority by any organisation? (eg. pilot’s licence, pilot certificate, driver’s licence, boating licence)	Yes	No
Have you had any criminal conviction or finding of guilt within the last 10 years, or any juvenile criminal conviction/finding of guilt within the last 5 years? Note: You should also include all motor vehicle traffic-related convictions.	Yes	No
Is there suspension or cancellation action pending in relation to any aviation licence you hold?	Yes	No
Are there any other matters relating to your fitness to hold an authorisation, including serious behavioural problems?	Yes	No

If you have answered yes to any of the questions on the previous page, please provide details about dates, actions, charges, convictions and imprisonment in Australia and overseas (attach a separate page if necessary)

**Part C – Submission Checklist**

CASA requires the following evidence to support your application.

I have attached evidence for the following:

Qualifications of nominated person	Yes	No	
Work experience of nominated person	Yes	No	
Relevant knowledge of nominated person	Yes	No	
Other CASA approvals currently held by nominated person	Yes	No	
Form 1162 Aviation Reference Number (ARN) application form (if applicable)	Yes	No	N/A
Details of matters relating to CASR 11.055	Yes	No	N/A

**Part D – Applicant’s Declaration \*- -**

Giving false or misleading information is a criminal offence under section 136.1 of the Criminal Code Act 1995 (Cth).

**DECLARATION**

- I, the nominated individual listed in A4, declare that the information provided on this form is true and correct.
- I, the nominated individual listed in A4, understand and accept that for CASA to proceed with this application, I have supplied all supporting documentation to CASA.

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

**What to do now**

Post, fax 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 Permission Application Centre Permissions Issue Section (BNE) GPO Box 2005 CANBERRA ACT 2601
Fax	(07) 3144 7333
Email	<a href="mailto:regservices@casa.gov.au">regservices@casa.gov.au</a>

**This completes your application.**

**Part E – CASA USE ONLY - -**

Name and signature of CASA Inspector who assessed this person as acceptable for the nominated position.  
Once assessed, a copy of the completed and signed CASA Form 004 must be returned to the nominee.

Name		Signature		Date	
Regional Office					