



Application received: / /

PART 1: GENERAL INFORMATION	
Part 1A: CASA Staff To Complete	
Is the aircraft under the control of the office where the application is made?	<input type="checkbox"/> Yes Place application on the aircraft file. Folio No: <input type="checkbox"/> No Refer to Team Leader (Airworthiness) for direction.
Is the aircraft file required at the office where the application is made?	<input type="checkbox"/> Yes Contact the Team Leader (controlling office): 1. Advise SFP submitted 2. Request aircraft file to be despatched 3. Date file sent: / / <input type="checkbox"/> No
Appointed AWI	
Name:	Office:
Preferred contact:	
Applicant	
Name:	Contact phone numbers:
Address:	Business:
.....	Home:
.....	Mobile:
Email:	Fax:
Registration number (only if aircraft is being delivered or exported CASR 21.197 (3))	VH-
Is the applicant the registered operator under CASR Part 47 ?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Registered operator	
Name:	Contact phone numbers:
Address:	Business:
.....	Home:
.....	Mobile:
Email:	Fax:
Has the registered operator been contacted?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Is the registered operator aware that a SFP application has been made and have they authorised it?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Actioning Officer:	Signature:
Part 1B: IoA Holder To Complete	
Raise an internal file in accordance with your procedures containing all the details required in Part 1A and a copy of the application	<input type="checkbox"/> Completed
Does the IoA permit you to issue the SFP?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If the IoA does not permit further action:	
1. Return the application to the applicant. Inform them IN WRITING that you cannot process the application. Recommend they resubmit the application to the local CASA Regional Office.	
2. Send copies of the application and letter to CASA Regional Office holding the aircraft file.	
	<input type="checkbox"/> Completed
From the application, fill out the information required in Part A.	<input type="checkbox"/> Completed
Checklists issued?	<input type="checkbox"/> Yes <input type="checkbox"/> No

PART 2: FLIGHT CHECKLIST	
Purpose (see CASR 21.197(1))	
Maintenance, repair and/or storage? <input type="checkbox"/> Yes <input type="checkbox"/> No	
If Yes, list details of the maintenance to be performed:	
Delivery or export? If Yes, complete Form 1260-02. <input type="checkbox"/> Yes Reg. No: VH- <input type="checkbox"/> No	
Production test flight? If Yes, complete Form 1260-04. <input type="checkbox"/> Yes <input type="checkbox"/> No	
Evacuation from impending danger? If Yes, complete Form 1260-05. <input type="checkbox"/> Yes <input type="checkbox"/> No	
Customer demonstration flight? If Yes, complete Form 1260-06. <input type="checkbox"/> Yes <input type="checkbox"/> No	
SAR. Rescue giving aid? If Yes, complete Form 1260-07. <input type="checkbox"/> Yes <input type="checkbox"/> No	
State of emergency? If Yes, complete Form 1260-08. <input type="checkbox"/> Yes <input type="checkbox"/> No	
Operations above certified MTOW (see CASR 21.197(2))? <input type="checkbox"/> Yes <input type="checkbox"/> No	
If Yes, complete Form 1260-03: MTOW: MTOW≤110%: MTOW>110%:	
Certification	
Aircraft type certified? <input type="checkbox"/> Yes <input type="checkbox"/> No	
If Yes: Country certifying the aircraft: TCDS No:	
CoA category: TAC No:	
Maintenance	
Is maintenance to be performed? <input type="checkbox"/> Yes <input type="checkbox"/> No	
If Yes: Where: When: / / By whom: Aircraft TTIS:	
Does this aircraft have a current maintenance release? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Are there any outstanding defects from the last maintenance inspection? <input type="checkbox"/> Yes <input type="checkbox"/> No	
If Yes, list details:	
What maintenance is currently required?	
Condition of aircraft	
Date aircraft last flown: / /	Date engines last operated: / /
Has the aircraft been prepared for storage? <input type="checkbox"/> Yes <input type="checkbox"/> No	 / /
Is the aircraft damaged? <input type="checkbox"/> Yes <input type="checkbox"/> No	
If Yes, list details of the damage with comments:	

Inspection required prior to further progress of the application?		<input type="checkbox"/> Yes <input type="checkbox"/> No
If Yes , add comments:		
Who will perform this inspection?		
Name:	Details of inspection required:	
Address:	
.....	
Contact:	
Inspection report filed?		<input type="checkbox"/> Yes
		Folio No:
		<input type="checkbox"/> No
What repairs have been carried out? Add comments:		
List all evident defects. Add comments:		
Does the above information affect airworthiness?		<input type="checkbox"/> Yes <input type="checkbox"/> No
If Yes , how?		
Is the structural integrity affected?		<input type="checkbox"/> Yes <input type="checkbox"/> No
If Yes , to what extent?		
Conditions		
What conditions can be placed on the flight/flights to compensate for the airworthiness problems and decrease in structural integrity? For example, if the estimated loss of structural integrity caused by defects, repairs, damage, corrosion is 20% then the load carrying capability needs to be decreased by more than 20%. If the MTOW is normally 1000kg, a decrease of 20% means that a MTOW of less than 800kg should be considered.		
List conditions:		
Discuss this application with an appropriate operational specialist. What additional factors/conditions need to be considered?	Operational specialist::	
.....	Name:	
.....	Address:	
.....	
.....	Qualifications:	
.....	