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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 applications@casa.gov.au.

Purpose of this form

Use this form to apply to CASA for consideration of a partial or full refund of a Levy payment made for the registration of a Commercial RPA.

Who is this form for?

This form is for organisations, including charities, or individuals who have paid CASA a levy for the annual registration of a commercial RPA after 27 July 2021, to request a partial or full refund of the payment.

Information needed to complete this form

Applicants must provide the RPA registration details and payment receipt reference/s in this application. In the instance where multiple RPA have been registered, applicants must attach an additional document listing the details for each RPA.

Aviation Reference Number (ARN)

An ARN is required to complete this form. If you do not have an ARN, [apply now](#).

If you are applying on behalf of an organisation, you will need to have authority to act on the entity's (applicant's) behalf and be able to provide the organisation's ARN.

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 details

1 What are the **applicant** details?

If your address, contact or other details have changed, you must update them using [changing your details](#).

Legal entity/full name of organisation/individual or charity

ARN

ABN/ACN

Charity number (if required)

Phone number

Email address

2 Are you the **registration holder**?

No I am an authorised representative for this organisation → [Go to 3](#)

Yes → [Go to 4](#)

Authorised representative details

3 What are the **authorised representatives** details?

Contact details will be used for this application only

Full name

ARN

Phone number

Email address

4 What is the **reason** for the refund request?

Note: The refund will be paid to the card/account that was used to make the original payment.

Registered charity

Duplicate registration, resulting in double payments

Administrative error or advice from CASA

Bank or transaction error
Error details:

Public Interest event
Event details:

RPA registration details

5 What are the **RPA registration** details?

Note: If multiple RPA have been registered in one transaction please attach a separate list with the registration, manufacturer, model, serial number for each RPA.

myCASA Registration number

Manufacturer

Model

Serial number

Payment receipt/s reference

 **Attach additional pages if required**

Application checklist

6 Select/specify attachments:

I have attached additional pages with RPA details (only required if application is for multiple RPA)

Other

If other please specify

This area has been intentionally left blank

This area has been intentionally left blank

7 I declare:

- All statements in this application are true and correct.
- I am authorised to make this application and hold the role indicated below.

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.

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](#).

- 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)

/ /

Role authority

8 In what capacity are you making this declaration?

- Self
- Director
- CEO
- Authorised representative
- Maintenance controller
- CRP
- Other, please specify:

An authority must be provided if the person making this declaration is **not** the individual or an office holder of the entity named in question 1.

 **Attach authority**

Submitting this form to CASA

OPTION 1 By email



Send this form with all supporting documents attached to applications@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**