



Download this form before you begin

Please download and complete with Adobe Acrobat. If you're using a browser to complete this form you may lose your information. Send this form and any attachments to regservices@casa.gov.au.

Purpose of this form

Use this form if you intend to apply for an initial issue, renewal of, or changes to general approvals issued under CASR Part 91.

Who is this form for?

This form is for aircraft operators who wish to apply for initial Navigation approval, renew or make changes to their existing approval under CASR 91.655 – RVSM and 91.660 – RNP AR operations.

For other approvals under CASR Part 91, refer to Part 91 Approvals - General (Form: CASA-04-5690)

Information needed to complete this form

Operators or persons that do not hold or are not applying for an Air Operator's Certificate (AOC) who wish to apply for general approvals should review CAR Part 91 before completing this form.

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. You will need to pay the estimate and send additional supporting documentation with your payment before any assessment of your application occurs.

Aviation Reference Number (ARN)

An ARN is an identifier that is similar to an account or customer number. You will need an ARN to complete this form.

If you do not have an ARN, [apply for an ARN](#).

If you are applying on behalf of an organisation, you need to provide the organisation's ARN and have authority to act on behalf of the entity.

Contact details

CASA will use the currently held contact, ABN and ACN details linked to your ARN profile.

If your address, contact or other details have changed, you must update them online using [changing your details](#) prior to lodging this form.

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.

Privacy

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 civil aviation legislation and other Australian laws.

For full details on how CASA collects, protects and uses personal information, please refer to [CASA Privacy Statement](#).

For more information

Go to the [CASA website](#) or call us on 131 757.

Part A Application type

A1 What are you **applying** for (select one)?

Initial approval
Variation
Approval Reference

AOC Reference

Operator details

A2 What are the **operator** details?

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

Name of operator

ARN

ACN or ARBN

Contact number

Email

Registered address
Unit/number

Street name

Suburb

State/territory

Postcode

Country (if not Australia)

Contact person

A3 What are the **contact person** details?

Contact details will be used for this application only, including any questions and/or fee estimates.

Full name

Position (Agent, Secretary)

Contact number

Email address

Part B - Authorisation and Aircraft Details

B Provide details of the aircraft and select the relevant navigation authorisations that will apply for each aircraft

 Attach additional pages if required

Aircraft Manufacturer	Aircraft Model	Serial No	Registration Mark	Est. date of entry into service dd/mmm/yy	Is it a new Aircraft? (Y/N)	Authorisations Select only the specifications that are applicable	
						RVSM	RNP AR

Part C - Application checklist

Select all that apply:

C1 Aircraft Eligibility

OEM certification for RVSM or RNP AR (as applicable) operations is attached

Modified Aircraft applicable documentation demonstrating airworthiness certification is attached

C2 Continuing airworthiness

Maintenance schedule reference for the relevant systems is attached

Aircraft Maintenance Manual (ICA) reference for the relevant system is attached

Operator's Minimum Equipment List is attached

Statement of Compliance is complete and provides precise references to documents demonstrating compliance

Aircraft equipment list is complete (make, model, part number [hardware and software])

C3 Flight operations procedures

Standard operating procedures and any associated checklists are attached

Reporting navigation errors/system failure procedures are attached

C4 Flight operational training

Flight crew training/recurrent syllabus implemented for the relevant Navigation Specification(s)

Flight crew, and relevant staff, qualified for the relevant Navigation Specification(s)

C4 RNP AR OPS only

The operators Flight Operational Safety Assessment (FOSA) is attached

The operator implementation program is attached

The operators FOQA program (or a compliant program acceptable to CASA) is attached

Part D - Declaration

I declare that:

- I am the operator named in Part A2
- All statements in this application are true and correct in every particular and that I have read and understood all provisions of the Civil Aviation Safety Regulations 1998 which are relevant to this application.
- I understand CASA will use the currently held details to process this application and it is my responsibility to ensure my details are correct prior to lodgement.
- I consent to CASA using and disclosing my personal information in accordance with [CASA Privacy Statement](#) including exchanging the information with Commonwealth, State and Territory government agencies.
- I acknowledge CASA will provide a fee estimate, which will be sent to the contact for this application.
- I accept that if this application is withdrawn or refused by CASA, or if CASA are unable to assess the application because I have failed to provide the required information, I am liable to pay CASA fees for work conducted.
- I acknowledge that to knowingly make a false or misleading statement in this application is an offence against the [Criminal Code Act 1995 \(Cth\)](#).

Full name

Signature

Date (DD/MM/YYYY)

/ /

Returning your form



By email – attach this form and all supporting documents. Send them to regservices@casa.gov.au