



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 surveillance@casa.gov.au.

Purpose of this form

Use this form to notify CASA of your details in preparation for a Subpart 21J Approval Holder surveillance activity.

Who is this form for?

This form is for Subpart 21J approved design organisations (ADO), in response to a CASA request for information.

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.

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.

For more information

Go to the [CASA website](#) or [contact us](#).

Part 21J holder details

1 What are the **Approval Holder** details?

Approval holder contact details must be current. Update contact details via [changing your details](#).

Approval Holder name

ARN

Trading name(s) (if multiple, separate with semicolon)

ACN or ABN

Phone number

Email address

Part 21J administration contact details

2 What are the **administration** contact details?

The administration email address will be used for providing the surveillance reports.

Full name

Position (Agent, Secretary)

Phone number

Email address

Key personnel details

3 Who is the **main contact** for the upcoming surveillance?

Full name

ARN

Phone number

Email address

4 Who is the **Accountable Manager**?

Full name

ARN

Phone number

Email address

5 Who is the **Head of Design**?

Full name

ARN

Phone number

Email address

6 Who is the **Quality Manager** (if applicable)?

Full name

ARN

Phone number

Email address

7 Please provide the total number of the following categories of employees:

Appointed persons

Design staff

Administration staff

Approval holder addresses

8 What is the **office address** of the business?

If a company, this is the official business address registered with Australia Securities and Investments Commission (ASIC).

Unit/number

Street name

Suburb

State/territory

Postcode

Country (if not Australia)

9 What is the **physical address** where you carry out your main aviation activity?

Same as the office address of the business

Differs from the office (business) address, specify below:

Unit/number

Street name

Suburb

State/territory

Postcode

Country (if not Australia)

10 What is the **postal address** where you want all your correspondence sent?

Same as the office address of the business

Differs from the office (business) address, specify below:

Unit/number

Street name

Suburb

State/territory

Postcode

Country (if not Australia)

Manuals

11 What are the Part 21J manual details?

Exposition name

Revision / amendment number

Revision / amendment date (DD/MM/YYYY)
/ /

Design assurance system manual name

Revision / amendment number

Revision / amendment date (DD/MM/YYYY)
/ /

Work health and safety (WHS) induction

12 Do you have an online WHS induction course?

No ➔ Go to 13

Yes ➔ Please provide WHS login details for CASA inspectors to undertake prior to any surveillance.

WHS login details:

Foreign national aviation authority (NAA) approvals

13 Do you have any foreign national aviation authority (NAA) approvals? Please provide a response for each option.

| Country | Foreign NAA | Response | |
|--------------------------|--|----------|-----|
| Brazil | National Civil Aviation Agency (Agência Nacional de Aviação Civil - ANAC) | No | Yes |
| Canada | Transport Canada | No | Yes |
| Europe | European Union Aviation Safety Authority (EASA) | No | Yes |
| New Zealand | Civil Aviation Authority (NZCAA) | No | Yes |
| Singapore | Civil Aviation Authority of Singapore (CAAS) | No | Yes |
| United Kingdom | Civil Aviation Authority (UKCAA) | No | Yes |
| United States of America | Federal Aviation Administration (FAA), United States Department of Transport | No | Yes |

13 continued

Other NAA approval - please provide details below:

Foreign NAA audits

14 Have any NAA audits been conducted on the ADO since the last CASA surveillance visit?

No ➔ [Go to 15](#)

Yes ➔ Please provide details below

| NAA | Audit date(s) | Finding(s) | | Finding(s) details (attach report if available) |
|-----|---------------|------------|-----|---|
| | | No | Yes | |
| | | No | Yes | |
| | | No | Yes | |

 **Attach NAA reports**

15 Have you had any third party audits conducted since the last CASA surveillance visit (other than NAA audits)?

No ➔ [Go to 16](#)

Yes

If so, is the ADO willing to share the third party audit reports?

No ➔ [Go to 16](#)

Yes ➔ Please provide details below

| Auditor(s) | Audit date(s) | Finding(s) | | Finding(s) details (attach report if available) |
|------------|---------------|------------|-----|---|
| | | No | Yes | |
| | | No | Yes | |
| | | No | Yes | |

 **Attach third party audit reports**

16 Has the ADO conducted internal audits since the last CASA surveillance visit?

No ➔ [Go to 17](#)

Yes ➔ Please provide details below

| Auditor(s) | Audit date(s) | Finding(s) | | Finding(s) details (attach report if available) |
|------------|---------------|------------|-----|---|
| | | No | Yes | |
| | | No | Yes | |
| | | No | Yes | |

 **Attach internal audit reports**

Failures, malfunctions, defects

17 Since the last CASA surveillance visit, has the ADO reported any failures, malfunctions and defects in accordance with CASR 21.003?

No ➔ [Go to 18](#)

Yes ➔ Please provide details below

Total number of failures, malfunctions and defects:

Enter details of failures, malfunctions and defects:

| Details of failures, malfunctions and defects | Date(s) |
|---|---------|
| | |
| | |
| | |

18 Since the last CASA surveillance visit, has the ADO had any failures/in-service difficulties reported by their customers?

No ➔ [Go to 19](#)

Yes ➔ Please provide details below

Total number of failures/in-service difficulties:

Enter details of failures/in-service difficulties:

| Details of failures/in-service difficulties | Date(s) |
|---|---------|
| | |
| | |
| | |

Design activities

19 Since the last CASA surveillance visit, have there been any changes to the list of suppliers who furnish services related to design?

| Supplier name(s) | Scope of Approval |
|------------------|-------------------|
| | |
| | |
| | |

20 Since the last CASA surveillance visit, has there been any changes to the list of persons authorised to carry out design activities?

| Authorised person(s) | Scope of Approval |
|----------------------|-------------------|
| | |
| | |
| | |

21 Please provide a list of approvals issued since the last CASA surveillance visit. Reference to previously submitted activity reports will suffice.

| Approval type | Document reference number | Description (including aircraft type and registration effectivity) |
|---------------|---------------------------|--|
| | | |
| | | |
| | | |
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| | | |



Attach additional pages if required

Declaration

22 I declare:

- All statements in this notice are true and correct.
- I am authorised to complete this form and hold the role indicated below.

I acknowledge by providing my details below and submitting this notice:

- I may commit an offence under the *Criminal Code Act 1995* if I make a false or misleading statement in my notice.
- 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 notice, is protected by the *Privacy Act 1988*.

We will use the information provided to process this notice and may also use it to conduct identity/security checks. Without your consent, we may not be able to process your notice.

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 notice in accordance with that policy.

Full name

Signature

Date (DD/MM/YYYY)

/ /

In what capacity are you making this declaration?

For example: Accountable Manager, HoD

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



By email – send this form with all supporting documents attached to surveillance@casa.gov.au