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OR



### 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 [AircraftRegistration@casa.gov.au](mailto:AircraftRegistration@casa.gov.au).

## Purpose of this form

Use this form to notify CASA of changes to the **aircraft details** on an aircraft that is already VH registered in accordance with regulation 47.115 of the Civil Aviation Safety Regulations 1998 (CASR).

## Who is this form for?

This form is for the aircraft registration holder, or an authorised registered operator, to notify a change to aircraft details.

## Information needed to complete this form

If there has been a change in the aircraft **ownership**, or to the appointed **registered operator** please refer to the relevant forms and instructions [Aircraft register forms and fees](#).

If there has been a change in the registered owner **contact or address** details, follow the instructions on [changing your details](#).

## 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 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.

## For more information

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

## Aircraft registration

- 1** What are the aircraft details, as currently recorded on the certificate of registration?

Registration mark (VH-)

Manufacturer

Model

Serial number

- 2** Who is notifying this change to the aircraft?

Aircraft registration holder

Registered operator

## Notifier details

- 3** What are the details of the notifier of this change?

If the **registered operator** is making this notification then **authority** to act on behalf of the registration holder must be attached.

Legal entity/full name

ARN

Phone number

Email address



**Attach authority if required**

## Details to be amended

- 4** What details need to be amended for this aircraft?

Details for make, model and serial number must match the details on the aircraft data plate. If a change has been made by you, provide the date the change occurred. If the notification relates to an error in the registration details, note '00/00/0000' in the date field.

Date the change occurred (DD/MM/YYYY)

/ /

Details to be amended

**For example:** serial number, model, manufacturer, engine, propeller, maximum take-off weight

Old details

New details

Only needed if more than one detail/component has changed.

Date the change occurred (DD/MM/YYYY)

/ /

Details to be amended

Old details

New details

Only needed if more than one detail/component has changed.

Date the change occurred (DD/MM/YYYY)

/ /

Details to be amended

Old details

New details



**Attach additional pages if required**

## 5 What is the reason for the change?

Provide an explanation of the reason for the change below.

**For example:** 'model changed due to installation of Service bulletin SB-1234'.

If you require additional space attach a separate page. Attach evidence of the change, for example: photo of data plate, copy of the applicable STC/Service Bulletin, etc.

 **Attach evidence**

## Notification checklist

### 6 Select all that apply:

Letter of authority is attached

Photo of data plate is attached

Copy of the applicable STC/Service Bulletin is attached

If other please specify

## Certificate of registration issue

### 7 Do you require a replacement Certificate of Registration?

If the updated information impacts the details on the certificate of registration, a new certificate will be issued, and the applicable fee will be charged.

No

Yes → [Go to 8](#)

### 8 Do you require the replacement Certificate of Registration to be sent to an address **other** than the postal address CASA holds for the registration holder?

No → [Go to 10](#)

Yes → [Go to 9](#)

### 9 What are the issue details?

Addressee

Unit/number

Street name/PO box

Suburb

State/territory

Postcode

Country (if not Australia)

**The entity paying the fee for this application should complete the payment authorisation.**

## 10 I declare:

- All statements in this notice are true and correct.
- I am the registration holder or registered operator identified in question 3, or an authorised representative of the entity named in question 3.

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

- This satisfies the requirement for me to sign 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](#).

### Fees

I accept if this notice is withdrawn or refused by CASA, or if CASA is unable to assess this notice because I have failed to provide the required information and/or documentation, I am liable to pay CASA fees for work conducted.

- 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

Date (DD/MM/YYYY)

/ /

## Role authority

### 11 In what capacity are you making this declaration?

Director

Company Secretary

CEO

President

Vice President

Agent

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 3.

 **Attach authority**

## Submitting this form to CASA

### OPTION 1 By email



Send this form with all supporting documents attached to [AircraftRegistration@casa.gov.au](mailto:AircraftRegistration@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**

### ↓ Continue to payment page

Only complete payment page if the updated information impacts the details on the certificate of registration, a new certificate will be issued, and the applicable fee will be charged.



## 12 Application fees

Replacement of a certificate of registration –  
processing and consideration of application –

**Fee Code: 12.4.....\$65**

**Total:**

## 13 Payment options

### OPTION 1 Online payment

### Make a secure payment online >

Online payments are more secure and also enable CASA to process your request faster.  
To make a payment go to [Secure payment gateway](#).  
After making a payment, enter the online receipt number below.

Provide the online receipt number below;

### OPTION 2 Credit card

I hereby authorise the Civil Aviation Safety Authority to **debit** the following amount from:

Mastercard

Visa

Total \$

Card number

Expiry (MM/YY)

/

Cardholder name

Signature

Date (DD/MM/YYYY)

/

/

**Receipt options**

Applicant

**or**

Third party (provide details below)

### Details of third party

ARN (If applicable)

Email

Legal Entity/ Full name

Phone number