**DD/MM/YYYY**

**SIVIL HAVACILIK GENEL MUDURLUGUNE**

**To Turkish Directorate General of Civil Aviation**

**Gazi Mustafa Kemal Bulvari No:128/A 06570 Maltepe ANKARA / TURKIYE**

We are an aircraft maintenance organization and hereby apply for Initial approval / One-Off approval / Approval scope change / Continuation of current approval / Supplement document revision approval.

Necessary documents and information is provided and we confirm that they are current and complete.

Sincerely yours,

Name & Signature

On behalf of the organization

Applicant information

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| 1. **Applicant name and adress**
 |
| *Registered name of applicant* |  |
| *Trading name (if different)* |  |
| *Postal Address* |  |

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| 1. **Approval Information**
 |
| *DGCA Approval Ref.* | TR.145.F.XXX | *EASA Approval Ref. which is the basis of the DGCA approval* | EASA/NAA\*.145.XXX |

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| 1. **Addresses Requiring Approval**
 |
| *Principal Place of Business address* |  |
| *Base, Engine and Component Maintenance site(s) (if different from the Principal Place of Business)* |  |
| *Line maintenance* s*tation(s) requiring approval* |  |

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| 1. **Contact information**
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| *Name* | *Telephone Number* | *Fax Number* |
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| *Quality e-mail* | *Organization generic e-mail* |
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| 1. **Proposed (\*) Accountable Manager Contact Details**
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| *Name* | *Telephone Number* | *E-mail address* |
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Application Details

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| 1. **Purpose of application**
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| **☐** | 6.1. We apply for **Initial Approval** for the type ratings mentioned on the below approval scope table. |
| **☐** | 6.2. We apply for **One-Off Approval** for the type ratings mentioned on the below approval scope table. |
| **☐** | 6.3. We apply for **Approval Scope Change** for the type ratings mentioned on the below approval scope table. |
| # | Subject | Filled by Applicant | Filled by SHGM. |
| Provided | Remarks | Adequate | Remarks |
| Y | N | Y | N |
| 1 | An official cover letter describing the application |  |  |  |  |  |  |
| 2 | A letter of intention from the Turkish Operator/CAMO to be service provided |  |  |  |  |  |  |
| 3 | Copy of the EASA Part-145 Approval Certificate which to be the basis for the DGCA approval |  |  |  |  |  |  |
| Company MOE and associated documents | 4 | EASA MOE |  |  |  |  |  |  |
| 5 | Procedures manual |  |  |  |  |  |  |
| 6 | CS list |  |  |  |  |  |  |
| 7 | Forms manual |  |  |  |  |  |  |
| 8 | **A DGCA supplement** to EASA MOE, which specifies the differences between EASA Part-145 and SHY-145 approvals. |  |  |  |  |  |  |
| 9 | A manpower plan showing that the organisation has sufficient staff. |  |  |  |  |  |  |
| Competent authority audits within the last surveillance period | 10 | Audit reports |  |  |  |  |  |  |
| 11 | Corrective action details |  |  |  |  |  |  |
| Quality audits within the last year | 12 | Quality audit plan |  |  |  |  |  |  |
| 13 | A sample audit report related to the application |  |  |  |  |  |  |
| 14 | Corrective action details |  |  |  |  |  |  |
| 15 | A sample maintenance work package of an aircraft whose type has been requested to be in SHY-145 approval. |  |  |  |  |  |  |
| 16 | Bank Receipt confirming the fee have been paid |  |  |  |  |  |  |

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|  **SCOPE OF APPROVAL TABLE**  |
| **CLASS** |  **RATING** |  **LIMITATION** |  **BASE** |  **LINE** |
| AIRCRAFT | **A1****Aeroplanes / Airships above 5700 Kg** | **Quote the expected aircraft type to be added and / or deleted.** | **Yes/No** | **Yes/No** |
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| **A2****Aeroplanes / Airships 5700 Kg and below** | **Quote the expected aircraft type to be added and / or deleted.** | **Yes/No** | **Yes/No** |
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| **A3****Helicopters** | **Quote the expected aircraft type to be added and / or deleted.** | **Yes/No** | **Yes/No** |
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| **A4****Aircraft other than A1, A2 or A3** | **Quote the expected aircraft type to be added and / or deleted.** | **Yes/No** | **Yes/No** |
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| **☐** | 6.4 We apply for **Continuation of Approval** for our current DGCA approval. |
| # | Subject | Filled by Applicant | Filled by SHGM. |
| Provided | Remarks | Adequate |  |
| Y | N | Y | N | Remarks |
| 1 | An official cover letter describing the application |  |  |  |  |  |  |
| 2 | A letter of intention from the Turkish Operator/CAMO to be service provided |  |  |  |  |  |  |
| 3 | Copy of the EASA Part-145 Approval Certificate which to be the basis for the DGCA approval |  |  |  |  |  |  |
| Company MOE and associated documents | 4 | EASA MOE |  |  |  |  |  |  |
| 5 | Procedures manual |  |  |  |  |  |  |
| 6 | CS list |  |  |  |  |  |  |
| 7 | Forms manual |  |  |  |  |  |  |
| 8 | A manpower plan showing that the organisation has sufficient staff. |  |  |  |  |  |  |
| Competent authority audits within the last surveillance period | 9 | Audit reports |  |  |  |  |  |  |
| 10 | Corrective action details |  |  |  |  |  |  |
| Quality audits within the last year | 11 | Quality audit plan |  |  |  |  |  |  |
| 12 | A sample audit report related to the application |  |  |  |  |  |  |
| 13 | Corrective action details |  |  |  |  |  |  |
| 14 | A sample maintenance work package of an aircraft whose type has been requested to be in SHY-145 approval. |  |  |  |  |  |  |
| 15 | Bank Receipt confirming the fee have been paid |  |  |  |  |  |  |
| **☐** | 6.5 We apply for **Revision Approval of DGCA Supplement Document** of our current DGCA approval. |
| # | Subject | Filled by Applicant | Filled by SHGM. |
| Provided | Remarks | Adequate |  |
| Y | N | Y | N | Remarks |
| 1 | An official cover letter describing the application |  |  |  |  |  |  |
| 2 | **A DGCA supplement** to EASA MOE, which specifies the differences between EASA Part-145 and SHY-145 approvals. |  |  |  |  |  |  |
| Company MOE and associated documents | 3 | EASA MOE |  |  |  |  |  |  |
| 4 | Procedures manual |  |  |  |  |  |  |
| 5 | CS list |  |  |  |  |  |  |
| 6 | Forms manual |  |  |  |  |  |  |

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| **Applicant's Commitment:**We declare that the above information is complete and accurate. |
| On behalf of the Organisation Name/Surname | Title | Sign | Date |
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| **SHGM’s Review:**Required documents iaw. SHY-145/SHT-145 legislation and SHGM Standard Services documentation, |
| **□** are included, found adequate. | **□** are not included, found inadequate. |
| Reviewer’s Name Surname-Title | Sign | Date |
|  |  |  |