

Section/division: **Licensing Section**Telephone number: **011-545-1000**Physical address: **Ikhaya Lokundiza, 16 Treur Close, Waterfall Park, Bekker Street, Midrand, Gauteng**Postal address: **Private Bag X73, Halfway House 1685**

Fax Number:

Form Number: CA 66-09.9

011-545-1467Website: www.caa.co.za

DETAILS OF BANK ACCOUNT FOR PAYMENT OF PRESCRIBED FEE	
Bank: Standard Bank of SA Ltd	Branch: Brooklyn, Pretoria Branch Code: 011245 Account Number: 013007971
COMPULSORY CLIENT PAYMENT CODE (to be completed on deposit slip)	
Service/transaction	Over the counter payments EFT, Internet, Wire, Electronic payments
AME Licence	<input type="text"/>

**APPLICATION FOR RENEWAL OF GRADE II INSTRUCTORS RATING
(AME)**

NOTE:

- All documents should be certified no faxes will be accepted.
- No documents will be accepted if not fully completed.

EMPLOYMENT CAPACITY (Please mark the appropriate block)

MANAGEMENT	INSPECTOR	AVIATION TECHNICIAN	AME	OTHER (specify)
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AME LICENCE NUMBER:	AMO LICENCE NUMBER:
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PART 1 (must be completed by all applicants in block letters)

Surname			
Full names			
ID/passport number	Nationality		
Date of birth			
Postal address	Postal code		
Telephone number	Fax number		
Cell phone number	E-mail		
Name of present employer			
Address of present employer			
	Postal code		
Gender	Race		
Telephone number	Fax number		

PART II (to be completed by all applicants)				
THE FOLLOWING DOCUMENTS MUST BE ATTACHED		<i>Please mark the relevant box</i>		
INSTRUCTORS GRADE II RENEWAL REQUIREMENTS: PART 66.09.9				
			Yes	No
1.	Application form CA 66.09.9 must be completed and signed by the applicant. The Accountable Manager (AM) or Quality Assurance Manager (QAM) which is approved in the Manual of Procedures as stipulated in Part 145 must also sign the form once it is completed by the applicant.			
2.	The AM or QAM designated stamp will be stamped on the application form next to his/her signature. The AM or QAM's name must be printed in block letters with the AMO License number in the appropriate space.			
3.	Certified true copies of the correct completed logbook (days, weeks or months as per AIC 65.5) from the last page previously submitted to the CAA. It is the responsibility of the applicant and the AM/QAM to ensure all experience is written up in a manner that the reader has a reasonable understanding of where, when and what maintenance constitutes the experience. A task-by task account is not necessary but at the same time a bland statement X or \sqrt experience is not acceptable.			
4.	Work done must be signed out by the supervising inspector in the appropriate column (use designated stamp as proof) and the AM/QAM must sign next to the summary certifying all information on that specific page is true and correct (use designated stamp as proof). <i>Summary should be written in logbook on a separate page or end of page.</i>			
5.	To renew a AME license with a category A, B, C, D, X, W the holder thereof shall within the 24 months preceding the date of expiry of the license, have served for not less than 6 months as a Instructor.			
6.	An application for the renewal of the license shall, within 90 days preceding the date of expiry be made to the commissioner.			
7.	Current MOP list of Management Personnel that show evidence of current Quality person and Accountable Manager.			
8.	AMO certificate to confirm that they are rated on this rating that the AME is requested to add onto his license.			
9.	A certified copy of an approved Human Factor course as per Part 141.02.1			
10.	The prescribed fee as in Part 187.			
PART III (to be completed by all applicants)				
I hereby declare that the particulars given by me are to the best of my knowledge and belief, true and correct in every respect.				
SIGNATURE OF APPLICANT		NAME IN BLOCK LETTERS	DATE	
SIGNATURE OF AMO's ACCOUNTABLE MANAGER/QUALITY ASSURANCE MANAGER		NAME IN BLOCK LETTERS	DATE	
Licence Number		AMO STAMP		