

**APPLICATION FOR ISSUE OF CERTIFICATE  
OF AIRWORTHINESS**

Form No.: AWF-COA-001

المهنة العامة للطيران المدني والأرصاد  
CIVIL AVIATION & METEOROLOGY AUTHORITY



1. Name of owner (or company):			
2. Address (in full) :		Phone:	
		Email:	
3. Name and address of applicant (Operator, if other than the AC owner):		Phone:	
		Email:	
4. Registration Mark: <input type="checkbox"/> Current <input type="checkbox"/> Allowed <input type="checkbox"/> Previous			
5. Description of aircraft: <input type="checkbox"/> New <input type="checkbox"/> Used			
State of manufacture		Year of manufacture	
Aircraft manufacturer		MSN Serial No.	
Model		Number of engines	
Type of engines		LOPA (No. of seats incl. crew)	
Type of propellers		Is radio fitted: <input type="checkbox"/> Yes <input type="checkbox"/> No	
6. MTOM (Max Take-Off Mass in kg):			
7. Category required			
<input type="checkbox"/> Transport Category (Passenger)		<input type="checkbox"/> Transport Category (Cargo)	
<input type="checkbox"/> Aerial Work Category		<input type="checkbox"/> Private Category	
<input type="checkbox"/> Others			
8. Ref. No. of Maintenance Schedule:			
9. Name and Address of AMO/Licensed Aircraft Engineer with whom aircraft is placed for the purpose of this application:			Telephone:
10. Place where aircraft may be surveyed:			
11. Complete for aircraft transferred from a foreign register:			
Country of origin:		TCDS Number:	
Aircraft Serial Number:		Export Serial Number:	
C of A Reference Number:		C of A Expiry Date: (If applicable)	

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**12. DECLARATION**

**I hereby declare that to the best of my knowledge and belief the particulars entered on this application are accurate and relevant.**

**The amount required by the CAMA to be paid with the application is enclosed herewith.**

**I also agree to pay any further charges in connection with this application which may be notified to me by CAMA rules.**

Name:

Signature:

Date: