Please fill out the following information

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| **Type Certificate Holder Details**  Company   |  | | --- | |  |   Address   |  | | --- | |  |   Contact e-mail   |  | | --- | |  | |

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| **Type Certificate Details**  Aircraft Models   |  | | --- | |  |   State of Design   |  | | --- | |  |   Type Certificate number of State of Design   |  | | --- | |  |   Type Certificate Data Sheet Application   |  |  |  | | --- | --- | --- | | **TCDS available** | **TCDS State** | **Type Certificate Data Sheet No.** | |  | **EASA:** |  | |  | **FAA:** |  | |  | **TCCA:** |  | |  | **ANAC:** |  | |  | **UK:** |  |   *Attach copies of TCDS to application*  **Declaration by applicant:**   * “I hereby confirm that all data referenced in GAR 21.25 will be made available to the Director of Civil Aviation upon request, in a form and manner acceptable to the DCA.” * “I hereby certify that all the documents submitted with this application are true in every respect.” * “I hereby confirm the aircraft complies with ICAO Annex 16 Volume 3.”   Name of applicant:   |  | | --- | |  |   Role/Position   |  | | --- | |  |   Date:   |  | | --- | |  |   Signature   |  | | --- | |  | |