



**REPUBLIC of SAN MARINO  
CIVIL AVIATION AUTHORITY**

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*APPLICATION FOR A NOMINATED AIRWORTHINESS COORDINATOR*

A vertical line in the margin indicates an amendment to the previous version.

| <b>1. GENERAL DETAILS</b>   |  |   |  |
|---|--|---|--|
| Name of Aircraft Operator:  |  |   |  |
| Registration Mark:  |  |   |  |
| Serial Number:  |  |   |  |
| Manufacturer's Designation of Aircraft:   |  |   |  |
| <b>2. DETAILS OF THE NOMINATED AIRWORTHINESS COORDINATOR</b>  |  |   |  |
| Nominated Airworthiness Coordinator Name:   |  |   |  |
| Telephone No.:  |  | Mobile No.:                             |  |
| Email:  |  | Fax No.:                                |  |
| <b>3. DECLARATION OF THE OPERATOR</b>   |  |   |  |
| As a designated representative of the Operator of the aircraft I confirm that the nominated Airworthiness Coordinator in Section 2 has been determined to be competent to undertake the tasks and fulfill the associated responsibilities.  |  |   |  |
| Date:   |  | Position:                               |  |
| Name:   |  | Signature:                              |  |
| <b>4. DECLARATION BY THE AIRWORTHINESS COORDINATOR</b>  |  |   |  |
| I have read and understand the obligations and responsibilities of the Airworthiness Coordinator as defined in CAR OPS 2A.601(f) or CAR OPS 2H.601(f), CAR AIR Subpart B and CAP 02 and agree to notify the CAA if I cease to be the Airworthiness Coordinator for this aircraft. |  |   |  |
| Date:   |  |   |  |
| Name of Airworthiness Coordinator:  |  | Signature of Airworthiness Coordinator: |  |