



**REPUBLIC of SAN MARINO
CIVIL AVIATION AUTHORITY**

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*APPLICATION FOR THE APPROVAL OF AN AIRCRAFT
MAINTENANCE PROGRAMME AMENDMENT*

Please complete this form electronically or in block capitals using black ink.

1. AIRCRAFT DETAILS			
Manufacturer's Designation of Aircraft:			
Manufacturer of Aircraft:			
San Marino Accepted TCDS Ref:			
2. DETAILS OF THE AIRCRAFT OPERATOR			
Name of Aircraft Operator:			
Address:			
Contact Person to Discuss the Amendment With:			
Telephone No.:			
Contact Email:			
3. DETAILS OF THE AIRCRAFT MAINTENANCE PROGRAMME			
	Reference	Issue/Rev. No.	Date
Operator's Aircraft Maintenance Programme:			
SM CAA Aircraft Maintenance Programme Approval:	CAT/AMP		
Maintenance Manual/Planning Document:			
Details of the Amendment (add continuation sheet if required):			

Technical Justification for the Amendment including details of implementation (add continuation sheet if required).

4. APPLICANTS DECLARATION

I hereby declare that to the best of my knowledge the particulars entered on this application are accurate in every respect.

Date:		Position of Applicant:	
Name of Applicant:		Signature of Applicant:	

5. CAA SMR USE ONLY

Date Application Received:		Allocated Inspector:	
Name and signature of Inspector Recommending Approval:		Date of Recommendation:	