Summary :

Page 2 and 3 : EASA Form 19,

Page 4 : Experience statement,

Page 5 to 7 : Synthetic experience statement sheet,

Page 8 : Statement of activity for Independent certifying staff following M.A.801(b)(1) / ML.A.801(b)(2).

**Documents to supply with the application :**

***Administrative elements (mandatory)***

- Form F-50-00-1 completed and signed,

- Original license to be sent by postal mail or statement of loss,

- Copy of a valid identity document (passport or identity card),

- Copy of a proof of residence (less than 3 months).

***Technical elements***

Initial application standard :

- Certificate(s) of recognition (EASA Form 148) for all the modules,

- Experience logbook attested in accordance with Annex 1 of procedure P-50-00 (Form F-50-05-0).

Type rating qualification :

- Certificates of recognition (EASA Form 149 - theoretical and or practical elements)

For the 1st type rating endorsement on category/sub-category :

- OJT logbook,

- Copy of OSAC approval letter.

Adding a category/sub-category :

- Certificate(s) of recognition (EASA Form 148) for all the modules,

- Experience logbook attested in accordance with Annex 1 of procedure P-50-00 (Form F-50-05-0).

Limitation removal :

- Certificate(s) of recognition (EASA Form 148) for all the modules,

and/or

- Form F-50-05-1 and/or F-50-05-3 and/or F-50-05-4.

Transfer to OSAC :

- Form F-50-00-1 annex 1, completed and signed,

- Copy of certificates of recognition (EASA Form 148) for all the modules,

- Copy of certificates of recognition (EASA Form 149 - Theory + practical elements).

Note: for a renewal application, only the administrative elements are required.

Application must be done only on the website www.osac.aero.

The original license must be sent to (without any other documents) :

OSAC/Pole DOME – 14, boulevard des Frères Voisin - Immeuble Zénéo - 92137 Issy-les-Moulineaux cedex - FRANCE

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| **APPLICATION FOR INITIAL / AMENDMENT / RENEWAL / DUPLICATE / TRANSFERT OF PART-66 AIRCRAFT MAINTENANCE LICENSE (AML)** | **EASA FORM 19** |
| **APPLICANTS DETAILS** :  Surname : First name :  Address :  City : Postcode : Country :  Postal address (if different):  Tel : Email :  Nationality : Date of birth (dd/mm/yyyy) : Place of birth : | |
| **Part 66 AML DETAILS** (if applicable) :  License No FR.66. Date of issue : | |
| **ENVIRONMENT OF THE MAINTENANCE ACTIVITY CARRIED OUT / EMPLOYER’S DETAILS :**  Unemployed,  Outside approved maintenance organization / independent certifying staff **(page 8 must be completed)**, and/or  In approved organizations **(informations below must be completed)** :  Name and address :  Maintenance Organisation Approval Reference :  Tel : Email : | |
| **APPLICATION**: (tick if appropriate)  Initial  Amendment  Renewal  Duplicate  Transfer  **(Sub) category A** **B1** **B2 B2L B3 C L (see below)**  Aeroplane Turbine  Aeroplane Piston  Helicopter Turbine  Helicopter Piston  Avionics *see system ratings below*  Piston engine non-pressurised aeroplanes of MTOM ≤ 2000 kg  Complex motor-powered aircraft  Aircraft other than complex motor-powered  **System ratings for B2L license::**     1. Autoflight 2. Instruments 3. Com/nav 4. Surveillance 5. Airframe systems   **L-license subcategories:**  L1C: composite sailplanes.  L1: sailplanes,  L2C: Composite powered sailplanes and composite ELA1 aeroplanes,  L2: powered sailplanes and ELA1 aeroplanes,  L3H: Hot Air Balloons,  L3G: Gas balloonsGas balloons  L4H: Hot-air airshipsHot-air airships  L4G: ELA2 gas airships ELA2 gas airships  L5: Gas airships other than ELA2 Gas airship other than ELA2  **Type rating(s) to be added :**  **Limitation removal Limitation to be removed (**if applicable**):** | |
| **DECLARATION OF APPLICANT** (tick if appropriate)  I wish to apply for initial  / amendment  / renewal  / duplicate  / transfer  of Part 66 AML as indicated and confirm that the information contained in this form was correct at the time of application.  I hereby confirm that (points 1 and 2 not applicable in case of transfer between Member States) :   1. I do not hold any part 66 AML issued in another Member State (not applicable in case of transfer) 2. I have not applied for any Part 66 AML in another Member State (not applicable in case of transfer) and 3. I never had a Part 66 AML issued by another Member State, which was revoked or suspended in any other Member State.   I also understand that any incorrect information could disqualify me from holding a Part 66 AML.  full name :  Signature: Date : | |
| **TRAINING/EXAMINATIONS**  I wish to claim the following credits (if applicable) :  I wish to claim the following credits (if applicable) :  Experience credits for Part-147 training :  Examination credits for equivalent exam certificates :  Please enclose all relevant certificatesExperience credits for Part-147 training :  Examination credits for equivalent exam certificates :  Please enclose all relevant certificates | |
| **RECOMMENDATION** **OF MAINTENANCE ORGANISATION** (only in case of OSAC specific authorization) :  It is hereby certified that the applicant has met the relevant maintenance knowledge and experience requirements of Part 66 and it is recommended that the competent authority grants or endorses the Part-66 AML  Remarks :  Signature : Name :  Position : Date :  Organisation approval number : | |

EASA Form 19 Issue 5

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| **EXPERIENCE STATEMENT - FURTHER INFORMATION TO EASA FORM 19** |
| **SUMMARY OF EXPERIENCE** (not applicable for renewal/duplicate/transfer)  *One page per employer*   |  |  | | --- | --- | | **Start and end dates** | **tasks** | |
| **DECLARATION OF EXPERIENCE**  Employer’s details:  EASA approval number :  Position and name (manager or quality manager)  Date : Signature and stamp: |

FULL NAME : AML 66 number: FR.66.

Type ratings:

The experience summary sheet must be used for any initial application or to add a (sub) category A, B1, B2 or B3, L categories are not concerned.

Notes:

• *This summary sheet does not replace the need to supply the complete logbook*

*• The technical or quality manager shall confirm that all types of tasks were performed in operating aircraft covering a representative cross section of maintenance activities in the corresponding subcategory;*

*• Each ATA or group of ATAs are covered by a significant number of tasks*

*• One summary sheet needed for each sub category.*

| *Tasks*  *ATA Chapters* | *Operational test* | *Servicing* | *Removal Installation* | *Trouble shooting* |
| --- | --- | --- | --- | --- |
| *00 - Example* | *75* | *63* | *36* | *12* |
| *01  Introduction* |  |  |  |  |
| *05  Periodic Inspections* |  |  |  |  |
| *06  Dimensions And Areas* |  |  |  |  |
| *07  Lifting And Shoring* |  |  |  |  |
| *08  Leveling And Weighing* |  |  |  |  |
| *09  Towing And Taxiing* |  |  |  |  |
| *10  Parking, Mooring, Storage And Return To Service* |  |  |  |  |
| *11  Placards And Markings* |  |  |  |  |
| *12  Servicing - Routine Maintenance* |  |  |  |  |
| *18  Vibration And Noise Analysis (Helicopter Only)* |  |  |  |  |
| *20  Standard Practices - Airframe* |  |  |  |  |
| *21  Air Conditioning* |  |  |  |  |
| *22  Auto Flight* |  |  |  |  |
| *23  Communications* |  |  |  |  |
| *24  Electrical Power* |  |  |  |  |
| *25  Equipment / Furnishings* |  |  |  |  |
| *26  Fire Protection* |  |  |  |  |
| *27  Flight Controls* |  |  |  |  |
| *28  Fuel* |  |  |  |  |
| *29  Hydraulic Power* |  |  |  |  |
| *30  Ice And Rain Protection* |  |  |  |  |
| *31  Indicating / Recording Systems* |  |  |  |  |
| *32  Landing Gear* |  |  |  |  |
| *33  Lights* |  |  |  |  |
| *34  Navigation* |  |  |  |  |
| *35  Oxygen* |  |  |  |  |
| *36  Pneumatic* |  |  |  |  |
| *37  Vacuum* |  |  |  |  |
| *38  Water / Waste* |  |  |  |  |
| *39  Electrical - Electronic Panels And Multipurpose Components* |  |  |  |  |
| *41  Water Ballast* |  |  |  |  |
| 42 Integrated modular avionics |  |  |  |  |
| 44 Cabin Systems |  |  |  |  |
| *45  Central Maintenance System (Cms)* |  |  |  |  |
| *46  Information Systems* |  |  |  |  |
| *47 Nitrogen generation system* |  |  |  |  |
| *49  Airborne Auxiliary Power* |  |  |  |  |
| 50 Cargo and AccessoryCompartments |  |  |  |  |
| *51  Standard Practices And Structures - General* |  |  |  |  |
| *52  Doors* |  |  |  |  |
| *53  Fuselage* |  |  |  |  |
| *54  Nacelles / Pylons* |  |  |  |  |
| *55  Stabilizers* |  |  |  |  |
| *56  Windows* |  |  |  |  |
| *57  Wings* |  |  |  |  |
| *60  Standard Practices - Propeller / Rotor* |  |  |  |  |
| *61  Propellers / Propulsors* |  |  |  |  |
| *62  Main Rotor(S)* |  |  |  |  |
| *63  Main Rotor Drive(S)* |  |  |  |  |
| *64  Tail Rotor* |  |  |  |  |
| *65  Tail Rotor Drive* |  |  |  |  |
| *66  Rotor Blade And Tail Pylon Folding* |  |  |  |  |
| *67  Rotors Flight Control* |  |  |  |  |
| *70  Standard Practices - Engine* |  |  |  |  |
| *71  Power Plant - General* |  |  |  |  |
| *72  Engine* |  |  |  |  |
| *72(T)  Engine - Turbine / Turboprop, Ducted Fan / Unducted Fan* |  |  |  |  |
| *72(R)  Engine - Reciprocating* |  |  |  |  |
| *73  Engine - Fuel And Control* |  |  |  |  |
| *74  Ignition* |  |  |  |  |
| *75  Bleed Air* |  |  |  |  |
| *76  Engine Controls* |  |  |  |  |
| *77  Engine Indicating* |  |  |  |  |
| *78  Exhaust* |  |  |  |  |
| *79  Oil* |  |  |  |  |
| *80  Starting* |  |  |  |  |
| *81  Turbines (Reciprocating Engines)* |  |  |  |  |
| *82  Water Injection* |  |  |  |  |
| *83  Accessory Gear Boxes (Engine Driven)* |  |  |  |  |
| *84  Propulsion Augmentation* |  |  |  |  |
| *91  Charts* |  |  |  |  |
| *TOTAL* |  |  |  |  |

**DECLARATION**

Employer’s details:

EASA approval number:

Position and name (manager or quality manager)

Date: Signature and stamp:

**Request for information to prepare independent certifying staff activity monitoring – certifying staff in accordance with M.A.801(b)(1)/ML.A.801(b)(2).**

OSAC may have to carry out in-depth checks of the activities you carry out under cover of your mechanic's license. In the event of an activity monitoring, it will be conducted during a detailed inspection (M.B.303 / ML.B.303) of an aircraft on which you will be operating as independent certification personnel under M.A.801(b)(1)/ML.A.801(b)(2).

Thus, in order to schedule a possible inspection, you are required to fill in the table below with all your (future) planned maintenance activities that will be performed under your LMA Part-66 license, as an independent certifying staff, and known at the time of filling in this form:

If you have no maintenance activity planned, please indicate in the table “No maintenance activity planned”.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Dates | Registration of aircraft concerned | Aircraft type | Scope of planned maintenance | Address of the work |
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|  |  |  |  |  |

Place : Signature :

Date :