

CAAM/ANSA/COA/1

### AERODROME CERTIFICATION APPLICATION FORM

#### **About this Application Form:**

This form is approved by the Civil Aviation Authority of Malaysia (CAAM) for the issuance of specific approvals. The application form is made up of four (4) sections as follows:

- 1) Section A Details of the applicant
- 2) Section B Details of aerodrome site
- 3) Section C Details of aerodrome
- 4) Section D Applicants declaration

### **Guidelines for Completing this Application Form:**

All applicants shall fill all sections of this application form. All information will be used to assess if the applicant is entitled to a Certificate of Aerodrome. An incomplete, poorly prepared or inaccurate application may:

- Result in rejection of the application
- Result in delays
- Result in a refusal to issue a Certificate of Aerodrome

## Giving false or misleading information is an offence under Regulation 67(1)(c) of the Civil Aviation (Aerodrome Operations) Regulations 2016.

If the form is filled by hand, use block letters and either a black or blue ballpoint pen. Some questions contain check boxes or columns to be ticked, annotate with a X where appropriate (e.g. columns where there is a YES/NO option). This information is used by the Air Navigation Services and Aerodrome Division when going through the application package.

### **Required Documentation Supporting this Application:**

- 1) CAAM/ANSA/AM/1
- 2) Aerodrome Manual / Heliport Operation Manual
- 3) Aerodrome Emergency Plan (AEP)
- 4) Safety Management System Manual (SMS)
- 5) Aerodrome Wildlife Hazard Management Plan (AWHMP)
- 6) Aerodrome Disabled Aircraft Removal Plan (ADARP)
- 7) Proof of payment

Note. – All documents are to be prepared and made readily available to process this application in electronic format. CAAM may request for hard copies if required.



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Section A -	Details (	of the A	pplicant					
Applicant type:								
	New Certification			Certificate of Aerodrome No.:				
	Renewal			(if applicable)				
Variation								
Name of Aero Operator (reformation Aerodrom Certificate)	lected							
Phone					Fax			
Registered Address					City			
		State			Postcode			
Details of th	e perso	n that yo	ou wish CAAM 1	to d	contact in re	elation t	o this application	
Full Name								
Phone					Mobile			
Email								
Section B -	Details (	of the A	erodrome Site					
Name of Aerodrome (this will be reflected on the aerodrome certificate)								
State				L	Lot No.			
District				Plan No.				
Geographical		Latitu	de					
Coordinate (	of ARP	Longi	tude					
Ground Elevation Aerodrome (Meters)								



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Section C – Details of Aerodrome									
1. Aerodrome O	peration	าร							
ls the aerodrome to be used by public transpor aircraft				YES		NO			
				24 – ho		ours	YES		
Aerodrome operation				operation		ions	NO		
(Only if not 24 – hours operations, state openii time and closing time)				Opening tin		g time			
				Closing time					
2. Type of Aircr	aft to Be	Operated a	at The Aer	odro	ome				
Aeroplane		Hel	icopter			Mic	Microlight		
Other (Specify):									
3. The Heaviest Type of Aircraft in Reference to the Type of Aircraft to be Operated									
Aircraft type									
Maximum total weight authorised (kg)									
Expected Number of movements per calendar heaviest aircraft type. (one movement is one tallanding)							l		
4. Obstacle Cor	itrol	_							
		Approach S	lope	%					
Obstacle Limitation Surface Take – off Slope			Slope	;			%		
Transitional Slop				%					
Is there a controlled area gazetted, under Civil			Civil Aviati	Aviation Act		YES			
1969 Section IV, for the aerodrome						NO			
If YES, state	Gazette	d reference							
	Date Ga	zetted							



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5. Local Authorities Approval (Before submitting this application, the local authorities, must be consulted (where applicable) and their approval obtained								
				YES	NO	N/A		
Local authorities for land – use								
Certificate of Completion and Compliance								
Fire and rescue services department approval								
Environmental impact assessment								
6. Air Traffic Management								
Is the aerodrome located within controlled airspace?				≣S				
				0				
If YES, state	Vertical Limits (feet)							
(in reference to ARP)	Lateral Limit							
Is the Air Traffic Control services with licensed Air Traffic Controllers be provided at the aerodrome?					NO			
Aerodrome Flight Information Service (AFIS)  YES					NO			
NOTAM YES					NO			
In reference to the above who is responsible to provide the services for AFIS and NOTAM			AFIS					
			NOTAM					



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### **Section D – Applicants Declaration**

#### **DECLARATION**

1. I declare and undersign below that the statements, answers and attachments provided in this application form is true and correct to the best of my knowledge in accordance with Civil Aviation (Aerodrome Operations) Regulations 2016 and Civil Aviation Directives (CADs).

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- 2. I understand that processing the application may be delayed if:
  - The application does not accurately and completely identify my/our requirements; or
  - The details in this application are subsequently changed; or
  - Adequate supporting documentation has not been provided.
- 3. I understand and agree that for CAAM to proceed with this application, I must:
  - Accept the cost as per Civil Aviation (Fees and Charges) Regulation; and
  - Forward the prescribed payment; and
  - Forward all supporting documentation as required by the specific approval being applied for.
- 4. I understand that before certificate of aerodrome is granted, the Authority will require to be satisfied that the physical conditions on the manoeuvring area and its environs are acceptable, that the scale of equipment and services are adequate, and that the aerodrome is organized, staffed and other arrangements sufficient to ensure the safe operations of the aerodrome. The requirements are set out in detail in the respective Civil Aviation Directives, Civil Aviation (Aerodrome Operations) Regulations 2016 and any relevant publications issued by the Civil Aviation Authority of Malaysia (CAAM) in relation to this application.

Name of Applicant	Signature	Date
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#### Note. -

- 1. CAAM may send materials/responses relating to this application by email or by mail.
- 2. Payment is made to the following accounts via Telegraphic Transfer (TT) or Electronic Fund Transfer (EFT):

Bank Name : Public Islamic Bank

Bank Account. : 0010695014
Account Name : ANSA CAAM
Swift Code : PBBE MYKL XXX

ID/ROC Number : AKTA788

Please provide the airport name or any information related to your application in the remark section when making TT or EFT.