

EASA Form 2 - Part-M/F Approval

Application for initial issue or significant changes for
Part-M/F Organisation

Please fill in the framed fields of the form, sign it and send it together with attachments to teo@austrocontrol.at, or via FAX to +43 5 1703 1666, or by post to:

AUSTRO CONTROL GmbH, Aviation Agency, Schnirchgasse 17, 1030 Vienna, Austria

1 Type of application

Initial issue Change

Austro Control GmbH is the Competent Authority of Austria for Part-M/F Approvals. Austria is a Member State of the European Union.

2 Applicant

Registered Name of the Organisation (acc. commercial register)

Trade Name (if different)

Part-M/F Approval Number (only for Changes)

Location for which approval is applied for

Street Place Postal Country

Telephone Fax E-Mail

3 Scope of the approval relevant to this application

4 Accountable Manager (or proposed AM)

Title First Name Last Name

Position in the Organisation

5 Signature

Place Date Signature of (proposed) Accountable Manager

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6 Detailed description of scope applied for

Rating	Limitation
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Class: Aircraft

A2	Airplanes/airships 5700 kg and below	
A2	Airworthiness review for ELA 1 aircraft not involved in commercial operations	
A3	Helicopters	
A4	Aircraft other than A1, A2 or A3	
A4	Airworthiness review for ELA 1 aircraft not involved in commercial operations	

Class: Engines

B1	Turbine	
B2	Piston	
B3	APU	

Class: Components other than complete engines or APUs

C1	Air Condition & Pressurisation	<input type="checkbox"/>	
C2	Auto Flight	<input type="checkbox"/>	
C3	Comms and Nav	<input type="checkbox"/>	
C4	Doors and Hatches	<input type="checkbox"/>	
C5	Electrical Power & Lights	<input type="checkbox"/>	
C6	Equipment	<input type="checkbox"/>	
C7	Engine - APU	<input type="checkbox"/>	
C8	Flight Controls	<input type="checkbox"/>	
C9	Fuel - Airframe	<input type="checkbox"/>	
C10	Helicopter - Rotors	<input type="checkbox"/>	
C11	Helicopter - Transmission	<input type="checkbox"/>	
C12	Hydraulic Power	<input type="checkbox"/>	
C13	Indicating - Recording System	<input type="checkbox"/>	
C14	Landing Gear	<input type="checkbox"/>	

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C15	Oxygen	<input type="checkbox"/>	
C16	Propellers	<input type="checkbox"/>	
C17	Pneumatic & Vacuum	<input type="checkbox"/>	
C18	Protection ice/rain/fire	<input type="checkbox"/>	
C19	Windows	<input type="checkbox"/>	
C20	Structures	<input type="checkbox"/>	
C21	Water Ballast	<input type="checkbox"/>	
C22	Propulsion Augmentation	<input type="checkbox"/>	

Class: Specialised services

D1 Non Destructive Inspections

Quote particular NDT method:

With reference to the above scope, pls complete the form similar to the following examples:

A2	Piper PA34	B1	Williams FJ 44-1A	C2	Thales, Bendix King
A2	Cessna Piston Twins	B2	Lycoming IO 540 Series	C4	Piper PA 34
A3	Bell 206 A, Bell 212 Series	B3	Garrett GTCP85 Series	D1	Eddy Current

There maybe any number of types/manufacturers, etc. listed against each rating.