APPLICATION FOR RNP AR APPROVAL



Submission instructions can be found at the end of the form.

FALSE REPRESENTATION STATEMENT

It is an offence under the UK Air Navigation Order to make, with intent to deceive, any false representation for the purpose of procuring the grant, issue, renewal or variation of any certificate, license, approval, permission or other document. This offence is punishable on summary conviction by a fine, and on conviction on indictment with an unlimited fine or imprisonment or both.

1. APPLICANT TYPE

Individual	Complete Section 2(a)	Charity	Complete Section 2(b)
Partnership	Complete Section 2(a)	Ministry of Defence	Complete Section 2(c)
Private Clubs	Complete Section 2(a) unless a	Trust	Complete Section 2(c)
	Limited Liability Partnership or Limited Company	Public Educational Establishment (University/College)	Complete Section 2(c)
Limited Liability Partnership	Complete Section 2(b)		
Limited Company	Complete Section 2(b)		

2. APPLICANT DETAILS (The Applicant is the person responsible for payment of CAA charges)

This application will be considered in respect of and, if appropriate, granted or issued to, the applicant(s) named below.				
a) Individual (including sole traders and partnerships)				
Title: Forename:	Surname:			
Address:				
Country	Postcode:			
Telephone:				
E-mail:				
Trading Name: (if applicable)				
Website address:				
In the case of a partnership, please complete details of all p	artners. Continued on a separate sheet			
This application will be considered in respect of and, if the Company Number provided on this form.	appropriate, granted to, the Company Name as registered under			
b) A Company				
Registered Company Name (in full):				
Registered Company Number:				
Registered Office Address:				
Telephone:				
E-mail:				
Trading Name: (if applicable)				
Trading Address (primary site):				
Country	Postcode:			
Website address:				

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Authorised Representative of Company					
This application is to be signed by either a Director or Company Secretary or a person authorised by the Board to act on behalf of the Company.					
Title: Forename:	Surname:				
Position in Company:					
Telephone No: E-mail: E-mail: If you are not a Director or Company Secretary and have been authorised to sign the application form on behalf of the Company, proof of that authority must be provided with the completed application form.					
This application will be considered in respect of and, if appropria	te, granted or issued to, the applicant(s) named below.				
c) An Unincorporated Association or other body					
Name of Unincorporated Association or other body:					
Address:					
Country:	. Postcode:				
Telephone:					
- E-mail:					
Website address:	•				
Authorised Representative:					
This application is to be signed by a person or persons authorised by the body named above to act on behalf of it. This should normally be a member or members of the managing committee of the association or other body. Evidence of the authorisation to act on behalf of the association or body should be provided with the application.					
Title: Forename:	. Surname:				
Position:					
Charity Number (if applicable):					
3. ADDRESS FOR CORRESPONDENCE (if different from above)					
Postal Address (if different from above):					
1 Ostal Address (il different from above).	Postcode:				
	rostcode				
4. CAA REFERENCE NUMBER					
CAA Personal Reference/Training Organisation/ AOC No:					
5. AIRCRAFT DETAILS – Required for all Approval Requests	2				
Aeroplane Type, Fleet, or Variant	Registration(s)				

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Withdrawal/Cancellation of Application: In the event that this application is withdrawn or cancelled by the applicant, the application fee less the cost of any work carried out by the CAA to that date, may be refunded. Please see the CAA Refunds Policy at www.caa.co.uk/ors5 for more information.

NB: This application will not be processed until the applicable charges have been received.

9. FINANCIAL DECLARATION		
I am applying for RNP AR approval.		
I hereby declare that to the best of my knowledge the particulars entered on this application are accurate.		
I agree to pay the charges for this application in accordance with the Scheme of Charges.		
I agree to pay any additional charges which may become payable in respect of this application under the Scheme of Charges. I agree		
to pay the charges payable on application in accordance with the Scheme of Charges (www.caa.co.uk/ors5).		
Name of Applicant:		
(as shown in 2 (a), (b) or (c))		
Signature of Applicant (named in 2 (a), (b) or (c)) or		
Signature of Authorised Representative (named in 2 (a), (b) or (c)):		
Date:		

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10. APPLICATION FORM SUBMISSION SERVICE (SUBMIT)

Once you have completed your application form, please save a copy to your device. Click on the button below to submit your application and supporting documentation (if applicable). You will be required to upload a copy of the completed application form as part of the submission.

The button will direct you to the CAA Customer Portal. The first time you access the CAA Customer Portal you will need to create a user account, there are instructions provided and it only takes a few minutes to register. If you have used the CAA Customer Portal before, please log in to your existing user account.

After receipt of your application, we will contact you using the contact details provided on this form to request payment of the relevant application fee. Please indicate your preferred payment method:

Email (you will receive a secure payment link from 'noreply@payments.caa.co.uk')

SMS (you will receive a secure payment link from 'CAA PAYMENTS')

Please note: Your application will not be processed until you have submitted it via the CAA Customer Portal and provided the supporting documentation (if applicable).

The charge(s) required will be calculated in accordance with the current CAA Scheme of charges <u>List of Official Record Series 5 - Scheme of Charges (caa.co.uk)</u>

Important: Please save your completed form before proceeding.

Application Form Submission Service

If you prefer, you can access the service by logging onto the CAA Customer Portal via https://portal.caa.co.uk and selecting the Application Form Submission Service.

Please note that a minimum of 60 working days will normally be required to check and confirm the information given above - if data is missing or omitted the process may take considerably longer.

CAA USE ONLY	Applicant's name	Date of application		
Department:		Contact Name:		
Job No:	Folio No:	CAA Account Number:		
Nominal Code:	Cost Centre:	Date received		
The sum of £	has been received by:	Date:		
Amount paid by:	Card Bank	k Transfer*		
£	£			
* Receipt of Electronic Transfer to be verified by Treasury.				
Bank Account No:		Sort Code:		
Is this part of a Company paym	ent? Yes	No If Yes-Total amount paid:£		
Amount to be deducted from NATS account: £				
Enclosures:	FedEx paid Y	es/No Loaded by: Signed/Despatched:		
Legal Entity Details				
Company – Date of incorporation of Company:				
If declaration is signed on behalf of a Company:				
is declaration signed by a Director or Company Secretary?				
if not, then does signatory have authority to sign?				

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Individual – Identification Document Details e.g. Passport/Driving Licence.						
Type of identification:						
Signature on ID checked against Form Signature:	Appropriately certified:					

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