PRE-APPLICATION STATEMENT

Republic of Cyprus
DEPARTMENT OF CIVIL AVIATION

Flight Operations

Pre-application statement to be completed by an applicant for an Air Operator Certificate (AOC)

Section 1A. To be completed by all applicants	
1. Company registered name and trading name if different. Address of company, mailing address, telephone, fax, email and web address if appropriate:	2. Address of principal place of business, including telephone, fax, email and web address if appropriate:
	Secondary business address:
3 Type of Operation intended: describe	e the sort of activity you wish to undertake.
4. Proposed start-up date:	
Management and nominated persons	: Provide details of the intended AOC
,	
and evidence of their competence in these ro	
 Proposed start-up date: Management and nominated persons management structure, the names of the indirection. 	: Provide details of the intended AOC viduals who will hold the following positions

Name	Company title
	Name

Note: The accountable manager should have the overall responsibility for running the organisation. When the accountable manager is not the chief executive officer, the DCA should be assured that the accountable manager has direct access to the chief executive officer and has the necessary air operations funding allocation.

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Section 1B. Proposals for maintenance: To be completed by all applicants				
	6. Air operator intends to conduct maintenance under its own Part 145 organisation	8. Provide address of principal place of business of maintenance organisation, including telephone, fax, email and web address if appropriate:		
	7. Air operator intends to conduct maintenance under a third-party Part 145 organisation			
Section 1C. Aircraft: To be completed by all applicants				
9. A aircraft:	ircraft data: Provide details and copie	es of the lease agreement for all leased		

10. Aircraft Details		
Number and Type of aircraft, registrations if known	MOPSC ¹	Type of operation (day, night VFR / IFR
registrations if known		
Section 1D. Additional Information:	To be comple	ted by all applicants
11. Area of Operation: provide of	details of inten	ded region/area of operation:
12. Provide details of how the op	peration will be	financed:
		ining will be conducted, and whether
flight simulation training devices will	be used:	
Section 2: To be completed by DCA		
14. AOC pre-application request	received on:	

¹ Maximum Operational Passenger Seating Configuration

15.	Allocated FOI:
16.	Allocated Surveyor:
17.	Pre-application Meeting arranged (date:)
18.	Flight Operations Section:
19.	HOU: