

## FORM - 10 APPLICATION FOR AIRWORTHINESS ASSESSMENT OF AIR SYSTEM / AIRBORNE STORES

In accordance with IMTAR - 21, Subpart B, 21.B1.4, 21.B2.5, 21.B3.5, 21.B4.4 Subpart C, 21.C1.4, 21.C1.5, 21.C2.3, 21.C2.4, 21.C3.1.4, 21.C3.1.5, 21.C4.2, 21.C4.3, 21.C6.1.2, 21.C6.1.3

| 1.    | Reference  |                 |           |      |      |      |  |      |  |
|-------|--|-----------------|-----------|------|------|------|--|------|--|
| 1.1   | Applicant's Reference  |                 |           |      |      |      |  | Date |  |
|       |  |                 |           |      |      |      |  |      |  |
| 2.    | Applicant's Information  |                 |           |      |      |      |  |      |  |
| 2.1   | <b>Applicant Company</b>   | ny Data         |           |      |      |      |  |      |  |
| 2.1.1 | Name and Address   | Applicant       | Number    |      |      |      |  |      |  |
|       | (As per Registration<br>with Registrar of<br>Companies, India)<br>Companies Act,<br>2013 | (Company        | y) Name   |      |      |      |  |      |  |
|       |  | Door/Stre       | et / Area |      |      |      |  |      |  |
|       |  | Post Offic      | e         |      |      |      |  |      |  |
|       |  | City / Stat     | te        |      |      |      |  |      |  |
|       |  | PIN             |           |      |      |      |  |      |  |
| 2.1.2 | Contact Person<br>(Responsible for this<br>application)                                  | Title           |           | □ Mr | □ Ms | □ Dr |  |      |  |
|       |  | Name            |           |      |      |      |  |      |  |
|       |  | Last Nam        | e         |      |      |      |  |      |  |
|       |  | Job title       |           |      |      |      |  |      |  |
|       |  | Phone/Fax       | X         |      |      |      |  |      |  |
|       |  | Email (Of       | ficial)   |      |      |      |  |      |  |
| 2.2   | Address for Communication  |                 |           |      |      |      |  |      |  |
| 2.2.1 | Address  | (Company        | y) Name   |      |      |      |  |      |  |
|       | (Required for<br>communication<br>with regard to this<br>application)                    | Door/Stre       | et / Area |      |      |      |  |      |  |
|       |  | Post Offic      | e         |      |      |      |  |      |  |
|       |  | City / Stat     | te        |      |      |      |  |      |  |
|       |  | PIN             |           |      |      |      |  |      |  |
| 2.3   | Organisation Approv  | pproval Details |           |      |      |      |  |      |  |
| 2.3.1 | DOA Details  | DOA Nun         | nber      |      |      |      |  |      |  |
|       | (if applicable)  | DOA Vali        | dity      |      |      |      |  |      |  |
|       |  | DOA Sco         | pe        |      |      |      |  |      |  |

| Version: 2.0 | Date: August 2023 |
|--------------|-------------------|



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| 2.3.2             | POA Details   | POA Number   |                        |                       |                |                  |                 |
|-------------------|---|--|------------------------|-----------------------|----------------|------------------|-----------------|
|                   | (if applicable)   | POA Validity   |                        |                       |                |                  |                 |
|                   |   | POA Scope  |                        |                       |                |                  |                 |
| 3.                | Air System Descripti  | on   | •                      |                       |                |                  |                 |
| 3.1               | Name of the Air<br>System   | Not exceeding 30 words.  |                        |                       |                |                  |                 |
| 3.2               | Brief about the<br>Project  | Not exceeding 100 words. Shall include details of Air System, hardware and software / CEH aspects (if applicable). Please add enclosure for additional details |                        |                       |                |                  |                 |
| 3.3               | Proposed IMTAR  | □21.B1 □21.B2  |                        | □21.B3                | □21.B4         | .B4              |                 |
|                   | Sub-part  | □21.C1   | □21.C2                 | □21.C3                | □21.C4         | □21.C5           | □21.C6          |
|                   |   |  |                        |                       |                |                  |                 |
| in this<br>I ackr | are that I am authorized a application form is connowledge that I have readerstand that the submiss | rect and comple<br>ad and understoo  | ete.<br>od the IM      | AR – 21.              |                |                  | nation provided |
| Date              |   | Name of the  | Authoris               | l Signatory           | Signatu        | re               |                 |
|                   | rtant Note: CEMILAC   |  | pt applic              | tions without signatu | re. Please mal | ke sure that the | application is  |
| This A            | Application should be se  | ent by fax, e-ma   | il or regu             | r mail to :           |                |                  |                 |
|                   |   | •  | ess & Ce               | ification (CEMILAC)   |                |                  |                 |
|                   | The Chief Exc<br>Centre for Mil   | ecutive (Airwor<br>itary Airworthin  | rthiness)<br>less & Co | ification (CEMILAC)   |                |                  |                 |



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## **Acknowledgement of Receipt of Application**

| 1. | Applicant's Reference  | Date                 |   |  |  |
|----|--|----------------------|---|--|--|
| 2. | Address (Required for communication with regard to this application) | (Company) Name       |   |  |  |
|    |  | Door / Street / Area |   |  |  |
|    |  | Post Office          |   |  |  |
|    |  | City / State         |   |  |  |
|    |  | PIN                  |   |  |  |
| 3. | Air System Title   |                      |   |  |  |
|    | The application has been received a                                  | The application w    | ill be reviewed and status will be informed |  |  |

| The application has been received on | . The application will be reviewed and status will be informed |
|--------------------------------------|--|
| in due course of time.               |  |
|                                      |  |

CEMILAC
For Chief Executive (Airworthiness)