In accordance with IMTAR -21, Subpart C,21.C1.22,21.C1.23,21.C1.24,21.C1.25,21.C2.9,21.C4.13,21.C4.14,21.C5.8,

21.C5.9

Select Applicable PC TA LoA IMATSOA

|  |  |  |
| --- | --- | --- |
| 1. **Reference** |  | **Date** |

|  |  |  |
| --- | --- | --- |
| **2. Applicant’s Information** | | |
| **2.1 Applicant Company Data** | | |
| **2.1.1** **Name and Address**  (As per Registration with Registrar of Companies, India)  Companies Act,  2013 | Applicant Number |  |
| (Company)Name |  |
| Door/ Street/ Area |  |
| Post Office |  |
| City / State |  |
| PIN |  |
| **2.1.2** **Contact Person**  (Responsible for this application) | Title | □ Mr □ Ms |
| Name |  |
| Last Name |  |
| Job Title |  |
| Phone /Fax |  |
| Email (official) |  |
| **2.2** **Address for Communication** | | |
| **2.2.1 Address**  (Required for communication with regard to this application) | (Company)Name |  |
| Door/Street/Area |  |
| Post Office |  |
| City /State |  |
| PIN |  |
| **2.3** **Organization Approval Details** | | |
| **2.3.1 DOA Details**  (if applicable) | DOA Number |  |
| DOA Validity |  |
| DOA Scope |  |
| **3 Airborne Stores Description** | | |
| **3.1 Airborne Stores Identification** | | |

|  |  |
| --- | --- |
| **3.1.1 Airborne Stores**  **Type Number / Part**  **Number** |  |
| **3.1.2 Airborne Stores**  **Nomenclature** |  |
| **3.2 CEMILAC Project**  **Code** |  |
| **3.3 Brief about the**  **Project** | Not exceeding 100 words. Please add enclosure for additional details |
| **3.4 IMTAR Subpart** | □21.C1 □ 21.C2 □ 21.C4 □21.C5 |

|  |  |
| --- | --- |
| **4. Airborne Stores Requirements Details** | |
| **4.1 Staff Requirements** | If applicable |
| **4.2 Airworthiness**  **Certification**  **Criteria** |  |
| **4.3 Airborne Stores**  **Requirement**  **Specification** |  |
| **4.4 Airworthiness**  **Certification Plan** |  |

|  |  |
| --- | --- |
| **5. Airborne Stores Configuration** | |
| **5.1 Standard of**  **Preparation** | List out all documents that defines the build standard of airborne stores. This may include but not limited to MDI, BOM, VDD, Process document. |

|  |  |
| --- | --- |
| **4. Airborne Stores Type Approval Compliance** | |
| **6.1 Limitations List** |  |
| **6.2 Type Record** | As per Form 29C |
| **6.3 TAB Compliance** |  |
| **6.4 User Performance**  **feedback** |  |
| **6.5 DoDP** | As per Form 23 for IMATSOA |

|  |  |  |
| --- | --- | --- |
| **7. Applicant’s Declaration**  I declare that Iam authorized by my organization to submit this application to CEMILAC and that all information  provided in this application form is correct and complete.  I acknowledge that I have read and understood the IMTAR-21.  I understand that the submission of the application, by itself, does not entitle PC/TA/LoA/IMATSOA | | |
| Place |  |  |
| Date | Head of Design | Signature |
| **Important Note: CEMILAC cannot accept applications without signature. Please make sure that the application is signed and official seal stamped.** | | |

**Note:** Only references of the documents to be provided in the respective places. This application shall be accompanied by **Form 29C** along with the necessary documents. This application shall be forwarded to dealing RCMA /CEMILAC for further process.

**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 Borne Stores Title** |  |  |

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

RCMA/CEMILAC

For Chief Executive (Airworthiness)