

APPLICATION FOR REGISTRATION OF AIRCRAFT

(New Registration, Change of Registration Details, Deregistration) (AITP-R01 Appendix 1)

Section 1	Nature of Application
Please tick the appropriate box relative to your application	
Application for New Registration, complete Sections 1,2, 3, 4, 5, 9	<input type="checkbox"/>
Application for change of a certificate of registration: mandatory Sections 1, 2.1, 3, 7, 9* <i>*(Please complete the appropriate sections in the application form relative to the details being amended, and indicate which sections have been amended in section 7.3). If the amendment is due to the transfer of rights or change of ownership, please provide the relevant supporting documents</i>	<input type="checkbox"/>
Application for re-issuance of a certificate of registration: complete Sections 1, 2.1, 3, 6, 9*	<input type="checkbox"/>
Application for the deregistration of aircraft, complete Sections 1, 2.1, 3, 8, 9*	<input type="checkbox"/>

Provide contact details of the person designated for all correspondence and instructions			
Name & Surname:		Address:	
Email Address:			
Office:		Fax:	
Mobile		Other:	

Provide contact details of the OWNERS of the aircraft for any correspondence which may arise			
Name & Surname:		Address:	
Email Address:			
Telephone:		Fax:	

Persons qualified to register an aircraft in the National Aircraft Register according to article 6(1) of the Aircraft Registration Act 2010, Chapter 503 of the Laws of Malta

a) The Government of Malta

b) Nationals of Malta, any European Member State, any state of the European Economic area and Switzerland, having a place of residence or business in Malta, the EU, the EEC or Switzerland, including a person sharing the ownership of such aircraft by virtue of the Community of Acquests subsisting between such a person and a citizen as described above in whose name the aircraft is registered.

c) Undertakings formed in accordance with the laws of Malta, an EU member state, of an EEA State or Switzerland and having their registered office, central administration or principal place of business within Malta, the EU, the EEA or Switzerland, whereof not less than 50% of the undertaking is owned and effectively controlled by the Government of Malta, or by any member state of the EU, or by persons referred to in paragraph (b), whether directly or indirectly through one or more intermediate undertakings.

d) A natural person who is a citizen of, or an undertaking established in, an approved jurisdiction, other than those mentioned in b) or c), shall be qualified to register aircraft in construction or one which is not used to provide air services, according to the conditions laid down in Section 6(d) of the Air Registration Act of Malta, 2010.

Section 2	Particulars of the Registrant/s
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2.1	Full name & address of the person (whether individual or body corporate) in whose name the aircraft is to be registered
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	Full Name & Surname	Address and Nationality*	Qualified (tick as appropriate, Note 1)	% ownership interest
•			a <input type="checkbox"/> b <input type="checkbox"/> c <input type="checkbox"/> d <input type="checkbox"/>	
•			a <input type="checkbox"/> b <input type="checkbox"/> c <input type="checkbox"/> d <input type="checkbox"/>	
•			a <input type="checkbox"/> b <input type="checkbox"/> c <input type="checkbox"/> d <input type="checkbox"/>	
•			a <input type="checkbox"/> b <input type="checkbox"/> c <input type="checkbox"/> d <input type="checkbox"/>	

* Nationality, if individual; or place of incorporation, if body corporate. If the registrant is a body corporate, please include registration number.

2.2	Please tick the capacity of the person(s) named in above, as applicable: (according to article 5(1) of the Aircraft Registration Act)
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•	Owner and operator of aircraft	<input type="checkbox"/>
•	Owner of aircraft under construction or temporarily not being operated or managed	<input type="checkbox"/>
•	Operator of aircraft under a temporary title (charterer)	<input type="checkbox"/>
•	Buyer of an aircraft under a conditional sale or title reservation or similar agreement	<input type="checkbox"/>
•	Other, [Please Specify]: _____	<input type="checkbox"/>

Note: If the aircraft is under any lease operating or management agreement, please attach a Certified True Copy of the relevant lease/operating/management agreement with the application form.

2.3	If the application for registration is based on ownership, please indicate the applicant's share of ownership interest:
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•	Are you the Sole Owner of the craft?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
•	Please indicate your eligibility status in terms of the criteria mentioned in Note 1		
	a) <input type="checkbox"/>	(b) <input type="checkbox"/>	(c) <input type="checkbox"/> (d) <input type="checkbox"/>

Note: If you are not the sole owner of the aircraft, please indicate in Section 3 the details of the persons sharing the ownership of the aircraft.

2.4	If the registrant is a trustee, please indicate the % interests of each of the beneficiaries of the trust and their qualification
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	Name of Beneficiary	Address	% of interest	Qualified (tick as appropriate, see Note 1)
•				a <input type="checkbox"/> b <input type="checkbox"/> c <input type="checkbox"/> d <input type="checkbox"/> N/A <input type="checkbox"/>
•				a <input type="checkbox"/> b <input type="checkbox"/> c <input type="checkbox"/> d <input type="checkbox"/> N/A <input type="checkbox"/>
•				a <input type="checkbox"/> b <input type="checkbox"/> c <input type="checkbox"/> d <input type="checkbox"/> N/A <input type="checkbox"/>

Note: Please enclose a Certified True Copy of the Owning Company's Memorandum and Articles of Association or list of authorised signatories, or other constitutive document as applicable

•	Please state the name of the State under whose laws the body corporate is registered:	
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Section 3		Particulars of Owner(s)		
•	Name	Address	Nationality	Percentage Ownership
	Name	Address	Nationality	Percentage Ownership
<i>Note: Please provide the Original or a Certified True Copy of the Bill of Sale in English, duly notarised or apostilled or legalised as applicable, evidencing title to the aircraft.</i>				

Section 4		Details of Resident Agent (if applicable)		
In the case of an international registrant appointing a Resident Agent, please provide details				
•	If Body Corporate			
	Resident Agent Name:	Contact Person:		
	Address:			
	Phone No:	Email:		
•	If the aircraft is to be registered in the name of a person in favour of whom a permit of residence has been issued in accordance with the provisions contained in section 7 of the Immigration Act, please indicate:			
	Resident Agent Name:			
	Address:			
	Phone No:	Email:		
<i>Note: Please enclose an explanation of Appointment of Resident Agent issued by the International Registrant, duly notarised & legalised by Apostille. This must be accompanied by the acceptance of such role by the Resident Agent.</i>				

Section 5		Particulars of Aircraft		
5.1	Previous aircraft Registration Details			
•	Was the aircraft previously registered in Malta?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	
•	If YES – please enter previous Maltese registration mark	9H - _____		
•	If No – please enter Registration Mark and Nationality under previous register:	_____		
•	Previous Nationality and Registration Marks	_____		

5.2	New aircraft Registration Marks			
•	Customised registration marks requested:	YES <input type="checkbox"/>	NO <input type="checkbox"/>	
•	If customised, please indicate your preferred marks in the order of preference: (3 alphabetical letters e.g. ABC)	1)	9H - _____	
		2)	9H - _____	

5.3	Aircraft Use (Tick where applicable)		
•	Commercial Air Transport <input type="checkbox"/>	Private Use <input type="checkbox"/>	

5.4 Please tick the classification of the aircraft, as applicable:
(according to Part A of the fourth schedule to the Aircraft Register Act, 2010)

•	Aeroplane (Land)	<input type="checkbox"/>	Gyroplane	<input type="checkbox"/>	Glider	<input type="checkbox"/>	Airship	<input type="checkbox"/>
	Aeroplane (Sea)	<input type="checkbox"/>	Helicopter	<input type="checkbox"/>	Kite	<input type="checkbox"/>	Homebuilt	<input type="checkbox"/>
	Aeroplane (Amphibian)	<input type="checkbox"/>	Microlight	<input type="checkbox"/>	Other	<input type="checkbox"/>	Specify, if other	<input type="checkbox"/>

5.5 Aircraft Registration Details

•	Name of constructor as per Type Certificate Data Sheet (TCDS):	
•	Type and model of aircraft: (as designated by the manufacturer)	
•	Country of manufacture of aircraft:	
•	Constructor's Serial Number (MSN):	
•	Year of manufacture :	
•	Aircraft New or Used (tick accordingly):	New <input type="checkbox"/> Used <input type="checkbox"/>
•	Maximum Take Off Mass (Kg):	Maximum Landing Mass (Kg):

5.6 Engine Details

Tick the appropriate engine type in the list:

•	Turbofan	<input type="checkbox"/>	Turbo Prop	<input type="checkbox"/>	Piston	<input type="checkbox"/>	Turbo Shaft	<input type="checkbox"/>	Other	<input type="checkbox"/>
•	Number of Engines:		Name of Engine Manufacturer: (As per TCDS)							
•	Model of Engine: (as designated by the manufacturer)									
•	Serial Numbers of Engines:	, , , .								
•	Serial Numbers of Spare Engines:	, , , .								
•	APU Type:		APU Serial Number:							
•	Engines New or Used (tick accordingly):	New	<input type="checkbox"/>	Used	<input type="checkbox"/>					

5.7 Details of Engine Owner(s) (Should the owner(s) request to have his/their details entered in the Register)

	Full Name	Address	% of Ownership
•			
•			
•			
•			

Note: Please provide the original or a certified true copy of the Bill of Sale, duly notarised and legalised evidencing title to the engines. Please attach the owner(s) consent which should be notarized (and legalized by apostille if executed outside Malta). Also include the consent from the registrant(s) which must be issued and signed by a duly authorized representative.

Section 6		Application for re-issuance of certificate of registration	
6.1	I, the undersigned		
	<i>(full name of director/member/trustee/person authorised to act on behalf of the applicant/registered owner)</i>		
6.2	Hereby apply for the re-issuance of certificate number		
	Reason(s) for application		
6.3	I hereby declare that the above particulars, as set out above, are true in every respect and apply for a re-issuance of the Certificate of Registration of aircraft registration number:	9H -	_____

Section 7		Application for the Amendment of details in the Aircraft Register and Certificate of Registration	
7.1	Please Enter the Registration Mark of the aircraft whose details are to be amended:	9H -	_____
7.2	Please state the current Certificate Number to be amended:		
7.3	Please fill up the relevant sections of the application form with the details to be amended		

Section 8		Application for the cancellation of Registration of an Aircraft	
8.1	I, the undersigned		
	<i>(full name of director/member/trustee/person authorised duly to act on behalf of the registrant) hereby apply for the deletion from the National Aircraft Register of the aircraft with the following registration details:</i>		
		9H - _____	and certificate number _____
	With effect from <i>(insert date)</i>		
8.2	Reasons for cancellation		
8.3	Country where aircraft is to be exported		
8.4	hereby declare that the above particulars, as set out above, are true in every respect and I apply herewith for deletion from the National Aircraft Register		<input type="checkbox"/>

Section 9**Declaration**

To be signed by the individual or individuals applying for Registration; or Amendment to the Aircraft Register, or Deregistration, as applicable.

I/We hereby declare that to the best of my/our knowledge, information and belief that the particulars and details given on this form are true in every respect.

I/We have familiarised myself/ourselves with the Maltese regulations regarding ownership and operation of an aircraft and I/we am/are aware of the responsibilities associated with being the registrants of this aircraft.

Signature(s) of Applicant(s)	2	_____	Date	_____
Name(s) in block capitals		_____		(DD/MM/YYYY)
Position held		_____	Capacity	
Signature(s) of Applicant(s)	3	_____	Date	_____
Name(s) in block capitals		_____		(DD/MM/YYYY)
Position held		_____	Capacity	

If body corporate, please indicate the authority of the signatory
(tick as appropriate)

Director Company Secretary Power of Attorney

Section 10**Additional Notes**

1. Further guidelines as to the necessary documentation required to be handed in to the Civil Aviation Directorate with this application is found within Information Advisory Notice 17 on www.transport.gov.mt
2. If the aircraft is owned by an unincorporated body or by more than one individual, the name, nationality and permanent residential address of all persons sharing in the ownership should be provided to the Registrar together with this application.
3. Where the applicant for registration is a trustee, the name, nationality and permanent residential address of each of the beneficiaries of the trust should be provided to the Registrar together with this application.
4. A club or hotel address does not satisfy the requirements indicated in (1) and (2) unless the relevant person resides there permanently.
5. In the case of an application for the amendment in the register of an aircraft, you will have to surrender the old certificate within 90 days from issuance of the revised certificate of registry.
6. Each applicant (where there is more than one) is required to sign the application form, where appropriate. In case of a body corporate, the Company Secretary, Managing Director or other duly authorised officer is required to sign stating his capacity in relation to the applicant.
7. In the course of the registration process we may exchange information about you with other Civil Aviation Authorities of other countries, and international aviation agencies. We may also check the information gathered with other information held by us and also with other third parties, so as to verify the accuracy of information, as well as to prevent or detect crime, and to protect public funds, as permitted by Maltese law.