

**APPLICATION FOR TEMPORARY APPROVAL TO CONDUCT
SPECIALISED OPERATION (AERIAL WORK) OVER MALTA**



CIVIL AVIATION DIRECTORATE

Aviation Avenue Luqa LQA9023, Tel: +356 2555 5653 Fax: +356 21239278, info.tm@transport.gov.mt, www.transport.gov.mt

This form is designed to elicit all the required information from those organisations holding an Aerial Work Certificate (or equivalent) issued by another State to gain approval from the Civil Aviation Directorate to perform specialised flight activity over the territory of Malta.	For Civil Aviation Directorate use only		
	Application ref:		
	Operator:		
	File ref:		
			Date application received:

Before completing this form please read Section III: 'Notes for Completion'. Part II of this form is an internal review of this application accomplished by the CAD.

SECTION I: COMPANY DETAILS AND LIST OF REQUIRED DOCUMENTATION

Name of Operator			
Registered address of organisation			
Name and contact details of person coordinating the activity and/or representing the operator/organisation		Name: Contact details:	
Type of intended aerial work			
Contracting agency name & address			
Start date		End date	
Type of aircraft		Registration marks	
To process this application copies of the following documents are required:			
Aerial Work Certificate or Equivalent	<input type="checkbox"/>	Certificate of Registration	<input type="checkbox"/>
Programme and details of planned activity (See note 2)	<input type="checkbox"/>	Certificate of Airworthiness	Applicable <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/>
Adequate insurance cover for the planned activity	<input type="checkbox"/>	ARC (EASA Form 15)	Applicable <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/>
Pilots' Medical and License including RT privileges in English (see note 3)	<input type="checkbox"/>	CAMO Contract	Applicable <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/>
Copy of the Operations Manual	<input type="checkbox"/>	Permit to Fly (EASA/National)	Applicable <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/>
Contract (financial details not required)	<input type="checkbox"/>	Other:	
The DGCA reserves the right to request further documentation or information as may be necessary. In particular a safety risk assessment will be requested for high risk activities.			

SECTION II: DECLARATION OF APPLICANT

I declare that the information provided on this form is correct. I shall notify the Directorate of any changes to the information provided.

Name: _____ Signature.....

Designation: _____ Date:

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SECTION III: NOTES FOR COMPLETION

1	Reference document: Air Navigation Order SL.499.09										
	<p>"aerial work" means any purpose, other than public transport, for which an aircraft is flown if payment or reward is given or promised in respect of the flight or the purpose of the flight;</p> <p>"aerial work aircraft" means an aircraft, other than a public transport aircraft, flying, or intended by the operator to fly, for the purpose of aerial work;</p> <p>"aerial work undertaking" means an undertaking whose business includes the performance of aerial work;</p> <p>"An aircraft shall not fly over Malta for the purpose of aerial survey except with the permission of the Minister granted to the operator or the charterer of the aircraft and in accordance with any conditions to which such permission may be subject."</p>										
2	The Programme and Details of planned activity										
	<p>The following details are required:</p> <ul style="list-style-type: none"> • Location of activity; • Dates, timings and duration of flights; • Altitude requested (In line with 'low flying regulations' contained in Schedule 13 of the Air Navigation Order); • Landing sites requested, other than Malta International Airport, if any; • Any other special requests. 										
3	Pilot's License										
	<p>If the licence does not include the English Language Proficiency endorsement indicating the level of ICAO Rating Scale and validity date, a certification of English Language Proficiency from the Authority that issued the license is required.</p>										
4	Safety Risk Assessment										
	<p>The operator should accomplish a safety risk assessment before initiating the specialized operation to: (1) identify safety hazards entailed by the planned activities; (2) conduct their evaluation; and (3) manage the associated risks by including actions to take to mitigate the risk and to verify their effectiveness. This is particularly necessary when operating over hostile environment :</p> <p>(a) a safe forced landing cannot be accomplished because the surface is inadequate;</p> <p>(b) search and rescue response/capability is not provided consistent with anticipated exposure; or</p> <p>(c) there is an unacceptable risk of endangering persons or property on the ground.</p> <p>A copy of the safety risk assessment will be requested for high risk activities.</p>										
5	Submissions and Enquiries										
	<p>Address for submissions and contact details for enquiries:</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 50%;">Civil Aviation Directorate</td> <td style="width: 50%;">Phone: +356 25555645</td> </tr> <tr> <td>ANS & ADR Unit (Attn: Mr. Roland Camilleri)</td> <td>Fax: +356 21239278</td> </tr> <tr> <td>Aviation Avenue</td> <td>Email: civil.aviation@transport.gov.mt</td> </tr> <tr> <td>Luqa LQA 9023</td> <td>roland.camilleri@transport.gov.mt</td> </tr> <tr> <td>Malta</td> <td></td> </tr> </table>	Civil Aviation Directorate	Phone: +356 25555645	ANS & ADR Unit (Attn: Mr. Roland Camilleri)	Fax: +356 21239278	Aviation Avenue	Email: civil.aviation@transport.gov.mt	Luqa LQA 9023	roland.camilleri@transport.gov.mt	Malta	
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	Applications should reach the CAD at least 15 working days before the planned operation.										