



UNITED ARAB EMIRATES
MINISTRY OF DEFENCE

UNITED ARAB EMIRATES MILITARY AIRWORTHINESS AUTHORITY

APPLICATION FOR ISSUE / AMENDMENT / RENEWAL OF MILITARY AIRCRAFT MAINTENANCE LICENCE

SECTION 1 – APPLICANT’S PERSONAL INFORMATION

Military Aircraft Maintenance License (MAML) Number (if previously issued):			
Applicant’s identification documents:	Emirates ID No.: (Numbers only)		
	Military No.: Y <input type="checkbox"/> N <input type="checkbox"/>		
	Staff No.: Y <input type="checkbox"/> N <input type="checkbox"/>		
Title / Rank		Family name	
First name		Middle name	
Nationality		Country of birth	
Date of birth (dd/mm/yyyy)		Town of birth	

SECTION 1.1 – Applicant Contact Details

Home address			
Town or Suburb			
Emirate	Post Code	Country	
E-mail			
Work phone (Numbers only, no dashes)	Mobile phone (Numbers only, no dashes)		

SECTION 1.2 – Other Aviation Maintenance Licenses Held Y N

GCAA reference		Date of Issue (dd/mm/yyyy)	
EMAR/EASA reference		Date of Issue (dd/mm/yyyy)	
Other		Date of Issue (dd/mm/yyyy)	

Please attach a copy of any other maintenance license with application for recognition purposes.

SECTION 1.3 – Applicant Work Details I am a current employee of a UAEMAR 145 Y N

Organisation / Unit		Approval reference: UAE.MAA.145. [XXXX]
Work venue address		
Emirate	Post Code	Country
Work venue Quality / Training Department e-mail		



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SECTION 2 – APPLICATION TYPE

MAML NO.:

Initial MAML <input type="checkbox"/>	Amendment of MAML <input type="checkbox"/>	Aircraft Type Rating <input type="checkbox"/>
Category Exclusion Removal <input type="checkbox"/>	MAML Renewal <input type="checkbox"/>	Aircraft Type Exclusion Removal <input type="checkbox"/>

SECTION 2.1 – Rating

Aeroplane Turbine	A1 <input type="checkbox"/>	B1.1 <input type="checkbox"/>		
Aeroplane Piston	A2 <input type="checkbox"/>	B1.2 <input type="checkbox"/>		
Helicopter Turbine	A3 <input type="checkbox"/>	B1.3 <input type="checkbox"/>		
Helicopter Piston	A4 <input type="checkbox"/>	B1.4 <input type="checkbox"/>		
Avionics			B2 <input type="checkbox"/>	
Aircraft				C <input type="checkbox"/>

SECTION 2.2 – Military Aircraft Type Rating endorsement / Limitation removal / Extension addition

Aircraft Type	Full or Partial S1000D System Coverage			Date Complete (dd/mm/yyyy)	Certificate No
	Full	Partial	Description of Scope		
	<input type="checkbox"/>	<input type="checkbox"/>			
	<input type="checkbox"/>	<input type="checkbox"/>			
	<input type="checkbox"/>	<input type="checkbox"/>			
	<input type="checkbox"/>	<input type="checkbox"/>			
	<input type="checkbox"/>	<input type="checkbox"/>			
	<input type="checkbox"/>	<input type="checkbox"/>			

Please provide any retired or civilian aircraft types endorsements and dates below:

Endorsement	Date (dd/mm/yyyy)	Endorsement	Date (dd/mm/yyyy)

*On completion, send form and documentation to MAA at UAEMAA@mod.gov.ae