



UNITED ARAB EMIRATES
MINISTRY OF DEFENCE

UNITED ARAB EMIRATES MILITARY AIRWORTHINESS AUTHORITY

APPLICATION FOR UAEMAR 147 APPROVAL

1. APPLICANT TRADING NAME OR MILITARY UNIT / GROUP

2. APPLICANT DATA

2.1 Registered Name and Address

Organisation Name

Street Number and Name

Suburb

State and Postcode, or
Emirate

Country

Important Note: An approval may be granted to an Organisation, which may be either a natural person, a legal entity or part of a legal entity. Therefore, confirmation of the legal status of your Organisation and a copy of the company Certificate of Incorporation must be included with this application.

2.2 Postal Address (if different from above)

Street Number and Name

Suburb

State and Postcode, or
Emirate

Country

2.3 Contact Person

Title/Rank

Full Name

Position Title

Phone Number

Email

3. APPROVAL CERTIFICATE REFERENCE NUMBER (if previously issued)

UAEMAR 147

UAE.MAA.147.[XXXX]



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4. ADDRESS OF SITE(S) REQUIRING APPROVAL

4.1 Maintenance Training Organisation Site

Facility/Site 1	Street Number and Name	<input type="text"/>
<input type="checkbox"/> Same as section 2.1	Suburb or Area	<input type="text"/>
Additional Sites	State and Postcode, or	<input type="text"/>
	Emirate	<input type="text"/>
<input type="checkbox"/> Yes <input type="checkbox"/> No	Country	<input type="text"/>

For additional facilities/sites, refer to Annex A.

5. SCOPE OF UAEMAR 147 APPROVAL RELEVANT TO THIS INITIAL* / CHANGE OF* APPLICATION

In case of application for change of the scope of work, only the parts of this table affected by the change are required to be completed.
*Delete as required.

CLASS	MAML CATEGORY	LIMITATION	
BASIC TRAINING (note 2)	B1 (note 2)	TB 1.1 (note 2)	AEROPLANES TURBINE (note 2)
		TB 1.2 (note 2)	AEROPLANES PISTON (note 2)
		TB 1.3 (note 2)	HELICOPTERS TURBINE (note 2)
		TB 1.4 (note 2)	HELICOPTERS PISTON (note 2)
		TB1 MIL (note 2)	MODULES 50-55 (or SUB-MODULES) (note 1) (note 2)
	B2 (note 2)	TB2 (note 2)	AVIONICS (note 2)
		TB2 MIL	MODULES 50-55 (or SUB-MODULES) (note 1) (note 2)
	A (note 2)	TA 1 (note 2)	AEROPLANES TURBINE (note 2)
		TA 2 (note 2)	AEROPLANES PISTON (note 2)
		TA 3 (note 2)	HELICOPTERS TURBINE (note 2)
TA 4 (note 2)		HELICOPTERS PISTON (note 2)	
TA MIL (note 2)		MODULES 50-55 (or SUB-MODULES) (note 1) (note 2)	
MILITARY AIRCRAFT TYPE / TASK TRAINING (note 2)	C (note 2)	T4 (note 2)	[Quote aircraft type] (note 3)
	B1 (note 2)	T1 (note 2)	[Quote aircraft type] (note 3)
	B2 (note 2)	T2 (note 2)	[Quote aircraft type] (note 3)
	A (note 2)	T3 (note 2)	[Quote aircraft type] (note 3)

Note 1: Military-specific systems modules/sub-modules that are within the scope of the approval shall be listed.

Note 2: Delete as appropriate if the organization is not approved.

Note 3: Complete with the appropriate rating and limitation.

6. OTHER APPROVALS ISSUED TO THE APPLICANT

Please detail the issuing NAA/NMAA and scope of approval. Add / delete lines as required.

NAA / NMAA	Scope
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>



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7. APPLICANT'S DECLARATION (To be completed by the Accountable Manager)

7.1 Declaration

- I declare that the information provided on this form is true and correct.
- I understand and accept that in order for the MAA to process this application, all relevant supporting documentation has been supplied.

Name

Position

Signature

Date

*On completion, send form and documentation as *Commercial-in-Confidence* to MAA at UAEMAA@mod.gov.ae

8. MAA USE ONLY

8.1 Record File ID

8.2 Organisation Approval application

- Application Approved
- Application Requires Resubmit
- Application Not Approved

8.3 Additional Comments

Name

Position

Signature

Date



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ANNEX A

Facility / Site(s)	4.1 Maintenance Training Organisation Additional Site(s)	
Facility/Site 2	Street Number and Name	<input type="text"/>
	Suburb	<input type="text"/>
	State and Postcode, or Emirate	<input type="text"/>
	Country	<input type="text"/>
Facility/Site 3	Street Number and Name	<input type="text"/>
	Suburb	<input type="text"/>
	State and Postcode, or Emirate	<input type="text"/>
	Country	<input type="text"/>
Facility/Site 4	Street Number and Name	<input type="text"/>
	Suburb	<input type="text"/>
	State and Postcode, or Emirate	<input type="text"/>
	Country	<input type="text"/>