



MAJOR REPAIR AND MODIFICATION

Print or type all entries.

See CARS Part 5, 5.7.1.1 and IS:5.7.1.1 for instructions and disposition of this form.

1. AIRCRAFT					
Make:			Model:		
Serial Number:			Nationality and Registration Mark:		
2. OWNER					
Name (As shown on registration certificate)			Address (As shown on registration certificate)		
3. FOR CASAS USE ONLY					
4. UNIT IDENTIFICATION				5. TYPE	
UNIT	MAKE	MODEL	SERIAL NUMBER	REPAIR	MODIFICATION
Airframe	------(As described in item 1 above)-----				
Powerplant					
Propeller					
Appliance	Type				
	Manufacture				
6. CONFORMITY STATEMENT					
A. Organisation Name and Address		B. Kind of License/Organisation		C. Certificate/License Number	
		<input type="checkbox"/> Licensed (AMT) <input type="checkbox"/> A <input type="checkbox"/> P or <input type="checkbox"/> A/P <input type="checkbox"/> Approved Maintenance Organisation <input type="checkbox"/> Manufacturer		(For an AMO include the appropriate ratings issued for the major repair or modification)	
D. I certify that the repair and/or modification made to the unit(s) identified in item 4 above and described on the reverse or attachments hereto have been made in accordance with the requirements of Part 5 of the Regulations and that the information furnished herein is true and correct to the best of my knowledge.					
Date			Signature of Authorised Individual		
7. APPROVAL FOR RETURN TO SERVICE					
Pursuant to the authority given persons specified below, the unit(s) identified in item 4 was inspected in the manner prescribed by the Director of CASAS and is <input type="checkbox"/> APPROVED <input type="checkbox"/> REJECTED					
BY	<input type="checkbox"/> CASAS Inspector			Other (Specify)	
	<input type="checkbox"/> Approved Maintenance Organisation	<input type="checkbox"/> Other			
Date of Approval or Rejection		Certificate or Designation Number		Signature or Authorised Individual	

NOTICE

Weight and balance or operating limitation changes shall be entered in the appropriate aircraft record. A modification must be compatible with all previous modifications to assure continued conformity with the applicable airworthiness requirements.

8. DESCRIPTION OF WORK ACCOMPLISHED

(If more space is required, attach additional sheets. Identify each page with aircraft nationality and registration mark and date work completed.)