



Application for Reissue of an
Expired AME Licence

Refer to: CAR 31, CAOs 100.90 & CASR 202.344

Day _____
File: _____

CASA Stamp:

IMPORTANT INFORMATION FOR APPLICANTS

1: This application will be assessed in accordance with Transitional Arrangements 202.CG of the CASR 1998, with the subsequent issue of a CASR Part 66 Licence.

2: If you are applying for additional ratings, other than those held on the expired licence, you must complete the appropriate form for the additional ratings (see www.casa.gov.au).

3: Please ensure your application and the checklist are completed correctly and that all required supporting documentation is provided. Incomplete applications will not be accepted and may be returned to you for amendment. Fields marked with an * are mandatory.

Family Name:* _____
Given Names:* _____
Date of Birth:* _____

ARN:*

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CONTACT DETAILS

Note: It is a regulatory requirement that you notify CASA of any changes to your personal contact information.

Correspondence including permissions issued as a result of this application will be sent by post to the current postal address according to CASA's records.

Have you updated your personal and contact details with CASA?

You should notify CASA of any changes using one of the following methods:

- Log onto the CASA Self Service Portal <https://portal.casa.gov.au/selfservice/>
- Submit Online Change of Details form <https://portal.casa.gov.au/casaforms/addrchange.htm>

Section A: Application Details *

1. Type of Application (check appropriate box)

☐ Reissue of licence expired ≤ 2 years
Complete Section A 2-3

☐ Reissue of licence expired > 2 years
Complete ALL Sections

2. Employer Details

Employer Name	Position Held with Employer
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3. Airworthiness Administration (AA) Examination

Have you passed your AA Examination within the previous 24 months:

- ☐ Yes Date: ____ / ____ / ____
- ☐ No – Application will be rejected

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4. Maintenance Experience and Employment History Relevant to this Application

(Licence expired >2 years ONLY)

Attach a letter detailing your most recent aircraft maintenance, totalling 6 months work within the previous 24 months prior to submitting this application. Attach supporting evidence from your employer.

Section B: Applicant Checklist *

<input type="checkbox"/>	I hold an Aviation Reference Number (ARN)
<input type="checkbox"/>	Application form signed and fully completed (including ARN entered on each page)
<input type="checkbox"/>	Letter detailing work history, including evidence of completing 6 months work in the last 2 years, attached (if expired more than 2 years)
<input type="checkbox"/>	Supporting evidence from employer attached (if expired more than 2 years)
<input type="checkbox"/>	Certified true copies of proof of age, identity and nationality attached
<input type="checkbox"/>	Payment Authorisation is completed (cheque or money order attached, if applicable)

Section C: Applicant Declaration *

I hereby certify that all statements in this application are true and correct in every particular and that I have read and understood all Civil Aviation Safety Regulation requirements relevant to this application and I do not suffer from any disability that is likely to affect my technical skill or judgement. I consent to CASA using and disclosing my personal information in accordance with CASA's privacy policy including exchanging the information with Commonwealth, State and Territory government agencies (see www.casa.gov.au/privacy). I have attached all required documentation specified in the applicant checklist and acknowledge that to knowingly make a false statement is an offence against the *Criminal Code Act 1995*.

Signature: _____

Date: ____ / ____ / ____

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Payment Authorisation

Applicant Details *

Surname:		Given Names:	
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Licence Fees *

Note: When an hourly rate is revealed to be over/under estimated, the applicant will be invoiced or rebated the fee difference

Fee Code	Description	Total
<input type="checkbox"/> 2.43 (2.12)	Consideration of expired licence application ≤ 2 years (\$130) <i>per hour</i>	\$ 65
<input type="checkbox"/> 2.43 (2.12)	Consideration of expired licence application > 2 years (\$130) <i>per hour</i>	\$ 130
<input type="checkbox"/> 2.43 (2.7)	Processing of a Licence	\$ 65
Total Estimated Cost:		\$ _____

Note: Fee Code 2.43 allows the grant of an AEL using the Transitional Arrangements under Subpart 202.CG of CASR 1998 – processing and consideration of application.

Details of Person Making Payment (if not the Applicant)

The receipt will be sent to the applicant's current postal address unless CASA is advised otherwise.

Individual's or Organisation's Full Name:		
Postal Address:		
State:	Postcode:	Country:
Contact Phone:	ARN: (if applicable)	

Payment Options *

- ☐ I have enclosed a Cheque or Australian Money Order (**please make cheques payable to CASA**)
- ☐ I am paying by credit card

I hereby authorise the Civil Aviation Safety Authority to debit the following amount from my:		Mastercard <input type="checkbox"/>	Visa <input type="checkbox"/>															
Card Number:	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>																Expiry Date:	____/____
Card Holder Name (please print):		Total:	\$ _____															
Signature:		Date:	____/____/____															

- ☐ My Company holds a line of credit with CASA – please enclose a purchase order

Attach this Payment Authorisation Form (and Cheque / Money Order / Purchase Order) to the Application Form.

- Mail to:** CASA Licensing and Registration Centre
CASA
GPO Box 2005
CANBERRA ACT 2601
- Fax to:** 1300 737 187

Paid Stamp

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