

INDIAN MILITARY TECHNICAL AIRWORTHINESS REQUIREMENTS FORMS

IMTAR FORMS



Centre for Military
Airworthiness and Certification



Directorate General
of Aeronautical Quality Assurance

**MINISTRY OF DEFENCE
GOVT. OF INDIA**

VERSION	2.0
DATE	August 2023

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FOREWORD

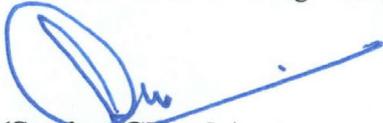
The activities in the design, development and production of military air systems and airborne stores have so far been regulated largely by the Ministry of Defence document DDPMAS which was first released in 1975 and later revised in 2002. The current DDPMAS Version 1.0 comprising of a layered structure of Framework & Procedures, Indian Military Technical Airworthiness Requirements and Manuals was released in 2021 after a comprehensive review and restructuring to bring it in-line with the international approach.

Taking into account the expansion of military aviation technology and projects in the country and with more and more private industry participation in *Aatmanirbhar Bharat Abhiyan*, this document has been further revised to streamline and fast track certification activities imbibing the global best practices in airworthiness certification and quality assurance. DDPMAS which was the Framework & Procedure document for Indian military airworthiness has now been suitably renamed as Indian Military Airworthiness Procedure (IMAP) document. This revised & renamed IMAP-2023 document supersedes DDPMAS Version 1.0.

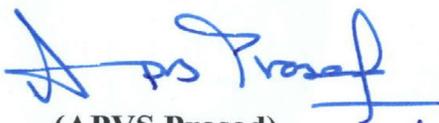
In line with the revised & renamed IMAP-2023 and IMTAR-21 Version 2.0, the Indian Military Technical Airworthiness Requirements (IMTAR) Forms Version 1.0 has also been revised and updated to IMTAR Forms Version 2.0. This IMTAR Forms Version 2.0 document needs to be read in conjunction with IMAP-2023 and IMTAR-21 Version 2.0 documents. This document is a part of the Manuals layer and shall facilitate the stakeholders in implementing the technical procedures and requirements leading to the issuance of airworthiness related clearances from the Technical Airworthiness Authorities.

IMTAR Forms Version 2.0 is conceived to be a live document with provision for updates. The amendments will be issued formally by the respective controlling authority i.e. CEMILAC and DGAQA.

Compliance to provisions in IMAP-2023 and technical airworthiness requirements in IMTAR-21 Version 2.0 shall be through the appropriate forms brought out in this document.



(Sanjay Chawla)
DG, DGAQA
Dated: 04 Aug 2023



(APVS Prasad)
CE(A), CEMILAC
Dated: 04 Aug 2023

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PROCEDURE FOR AMENDMENT

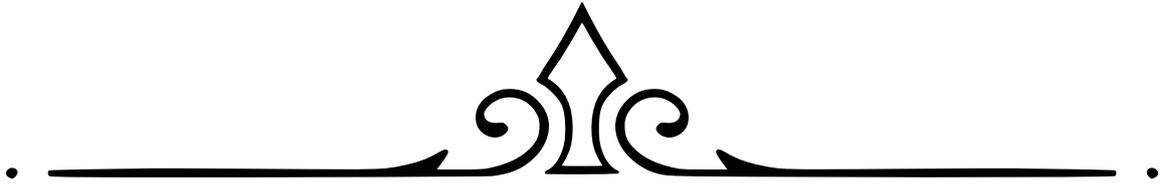
All the IMTAR form have a unique number. Each form corresponds to a particular subpart, which is mentioned in the index and in the respective forms. The current version of the form is identified by IMTAR Forms Version number and date, which are inscribed at the bottom of each form.

The amendments to IMTAR Forms approved through JAC are controlled and recorded through the change in version number of the Form and Date. The amendment record sheet given below is updated after every amendment, indicating details of amendment / reason for amendment along with date.

The copy of the amendment record sheet along with the modified Forms will be made available to the stakeholders.

Amendment Record Sheet					
Sl. No.	IMTAR Version	Form Number	Details of Amendment/ Reason for Amendment	Date of Amendment	JAC Approval Reference Number

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INTRODUCTION

The IMAP-2023 document is presented in a structured, coherent and a hierarchical manner, comprising of Procedure, Requirements and Manuals. The IMAP-2023 Procedure document defines roles, responsibilities and empowerment of stakeholders to address airworthiness in various scenarios and facets of the Air System and Airborne Stores life cycle. The requirements are captured in IMTAR-21 Version 2.0 document, which brings out the technical airworthiness requirements for technical airworthiness, that have to be followed to ensure airworthiness. Manuals serve to facilitate the stakeholders while implementing the requirements and seeking for necessary approvals and clearances from the airworthiness authorities. Manuals encompasses but is not limited to Forms, Templates, Airworthiness Certification Criteria, Airworthiness Circulars and Directives.

This document, IMTAR Forms is a part of the Manuals, that brings out the Forms that needs to be utilized by the stakeholder/applicant while complying to the appropriate regulations of the IMTAR-21 Version 2.0 document before seeking airworthiness clearances from the airworthiness authorities.

The Forms are mapped to the corresponding Subpart of the IMTAR-21 Version 2.0 document to facilitate traceability to the applicable requirement and its compliance. The same is also provided in Index of IMTAR Forms.

It is to be noted that IMTAR FORMS are meant to serve as guidelines, and can be adapted based on the application and nature of the Project.

IMTAR Forms document is conceived to be a live document with provisions for updates. The amendments will be issued formally by CEMILAC & DGAQA as per the Procedure for amendment.



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1.	Form – 1	Authorized Release Note Certificate	V 2.0	Subpart H, 21.H.2
2.	Form – 2	Application for Maintenance Organisation Approval	V 2.0	Subpart G3, 21.G3.4
3.	Form – 2A	Application for Significant Changes or Variation of Scope and Terms of Organisation Approval	V 2.0	Subpart G3, 21.G3.4
4.	Form – 3	Maintenance Organisation Approval Certificate	V 2.0	Subpart G3, 21.G3.4
5.	Form – 4	Application for Approval of Management Personnel	V 2.0	Subpart G1, G2, G3
6.	Form – 10	Application for Airworthiness Assessment of Air system/Airborne Stores	V 2.0	Subpart B, 21. B1.4, 21. B2.5, 21. B3.5, 21. B4.4 Subpart C, 21.C1.4, 21.C1.5, 21.C2.3, 21.C2.4, 21.C3.1.4, 21.C3.1.5, 21.C4.2, 21.C4.3, 21.C6.1.2, 21.C6.1.3
7.	Form – 11A	Application for Issue of RSD	V 2.0	Subpart B, 21.B1.21, 21.B2.22, 21.B3.23, 21.B4.21
8.	Form – 12	Certificate of Design	V 2.0	Subpart B, 21.B1.15, 21.B2.16, 21.B4.14, 21. B4.18, Subpart C, 21.C1.24, 21.C1.25
9.	Form – 20	Engineering Change Note (ECN)	V 2.0	Subpart B, 21.B1.13, 21.B2.14, Subpart C 21.C1.12,21.C1.13, 21.C4.12, 21.C4.13
10.	Form – 21A	Design Criteria Form for Metallic Material / Semi-Finished Metallic Component	V 2.0	Subpart C3, 21.C3.1.9, 21.C3.1.10
11.	Form – 21B	Design Criteria Form for Carbon-Carbon Aircraft Brake Discs	V 2.0	Subpart C3, 21. C3.1.9, 21.C3.1.10
12.	Form – 21C	Design Criteria Form for Composites / Ceramic Components	V 2.0	Subpart C3, 21.C3.1.9, 21.C3.1.10
13.	Form – 21D	Design Criteria Form for Polymer / Metal Matrix Composite Brake Pads	V 2.0	Subpart C3, 21.C3.1.9, 21.C3.1.10
14.	Form – 21E	Design criteria form / input data sheet for non metallic materials and components, paints and coatings	V 2.0	Subpart C3, 21.C3.1.9, 21.C3.1.10
15.	Form – 21F	Input Data Sheet for Fuel, Oil and Lubricants (FOL)	V 2.0	Subpart C3, 21.C3.1.9, 21.C3.1.10
16.	Form – 21G	Application form for Letter of Approval (LoA) for materials	V 2.0	Subpart C3, 21.C3.1.9, 21.C3.1.10

Sl. No.	Form Number	Form Name	Form Version Number	Reference of IMTAR-21 Section
17.	Form – 22A	Software Change Request (SCR)	V 2.0	Subpart C6, 21.C6.1.16, 21.C6.1.17
18.	Form – 22B	Software Problem Report (SPR)	V 2.0	Subpart C6, 21.C6.1.16, 21.C6.1.17
19.	Form – 22C	Application / Request for Software Clearance	V 2.0	Subpart C6, 21.C6.1.17, 21.C6.1.18
20.	Form – 22D	Application / Request for CEH Clearance	V 2.0	Subpart C6, 21.C6.2.7, 21.C6.2.8
21.	Form – 22E	Application / Request for IP CORE LoA (To Be Filled In By IP Developer)	V 2.0	Subpart C6, 21.C6.2.8
22.	Form – 22F	Application / Request for IP Core Data Sheet (To Be Filled In By IP Developer)	V 2.0	Subpart C6, 21.C6.2.8
23.	Form – 22G	Application / Request for IP Core Certification of Design by IP Developer (To Be Filled In By IP Developer)	V 2.0	Subpart C6, 21.C6.2.8
24.	Form – 22H	Letter of Approval (LoA)	V 2.0	Subpart C6, 21.C6.2.8
25.	Form – 22J	Software Change Note	V 2.0	Subpart C6, 21.C6.1.16, 21.C6.1.17, 21.C6.1.18
26.	Form – 23	Declaration of Design and Performance of Airborne Stores	V 2.0	Subpart C, 21.C5.9, 21.C5.10
27.	Form – 25	Signaling out Certificate for Air System.	V 2.0	Subpart H, 21.H.2, 21.H.5
28.	Form – 25A	Application for Certificate of Airworthiness (CoA) / Signal out Certificate for Air System	V 2.0	Subpart H, 21.H.4
29.	Form – 28	Clearance for Service Use (CSU) for Airborne Stores	V 2.0	Subpart C1, 21.C1.22, 21.C1.23
30.	Form – 29	Type Approval	V 2.0	Subpart C1, 21.C1.25, 21.C1.26
31.	Form – 29A	Application for Issue of TA / PC / LoA / IMATSOA	V 2.0	Subpart C1, 21.C1.22, 21.C1.23, 21.C1.24, 21.C1.25, 21.C2.9, 21.C4.13, 21.C4.14, 21.C5.8, 21.C5.9
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33.	Form – 29C	Type Record for Airborne Stores	V 2.0	Subpart C1, 21.C1.23, 21.C1.24, 21.C1.25, 21.C1.26
34.	Form – 29D	Application for Renewal of Type Approval	V 2.0	Subpart C1, 21.C1.28, 21.C1.29
35.	Form – 29E	Application for Amendment of Type Approval	V 2.0	Subpart C1, 21.C1.28, 21.C1.29

Sl. No.	Form Number	Form Name	Form Version Number	Reference of IMTAR-21 Section
36.	Form – 30	Military Type Certificate	V 2.0	Subpart B, 21.B1.20, 21.B2.21, 21.B3.22, 21.B4.20
37.	Form – 30A	Application for Issue of RMTC / MTC	V 2.0	Subpart B, 21.B1.19, 21.B1.20, 21.B2.20, 21.B2.21, 21.B3.20, 21.B4.18
38.	Form – 30B	Type Certificate Data Sheet	V 2.0	Subpart B, 21.B1.20, 21.B2.21, 21.B3.22, 21.B4.20
39.	Form – 30C	Type Record for Air System	V 2.0	Subpart B, 21.B1.19, 21.B2.20, 21.B3.20, 21.B4.18
40.	Form – 30D	Application for Renewal of RMTC / MTC for Air System	V 2.0	Subpart B, 21. B1.26, 21. B2.27, 21.B3.28, 21.B4.26
41.	Form – 31	Details of Modification Proposed for Air System / Airborne Stores	V 2.0	Subpart D, 21.D.8 Subpart E, 21.E.5
42.	Form – 31C	Application for Approval of Repair Scheme	V 2.0	Subpart M, 21.M.3, Subpart M, 21.M.4
43.	Form – 32	Alteration / Amendment for Air System / Airborne Stores	V 2.0	Subpart D, 21.D.4 Subpart E, 21.E.4
44.	Form – 33	Advanced Modification Information for Air System / Airborne Stores	V 2.0	Subpart D, 21.D.8 Subpart E, 21.E.5
45.	Form – 34	Format of Index of Modifications for Air System / Airborne Stores	V 2.0	Subpart D, 21.D.8 Subpart E, 21.E.5
46.	Form – 35	Modification leaflet Format for Air system / Airborne Stores	V 2.0	Subpart D, 21.D.9 Subpart E, 21.E.5
47.	Form – 36	Application for Concession on Modification / SI / STI / SB	V 2.0	Subpart F, 21.F.22, Subpart D, 21.D.10, Subpart E, 21.E.10
48.	Form – 38A	Application for Transfer of RMTC / MTC	V 2.0	Subpart B, 21.B1.25, 21.B2.26, 21.B3.27, 21.B4.25
49.	Form – 38B	Application for Transfer of PC / TA / LoA / IMATSOA	V 2.0	Subpart C, 21.C1.26, 21.C1.27, 21.C2.3, 21.C2.4, 21.C4.15, 21.C4.16, 21.C5.15, 21.C5.16
50.	Form – 40	Bought-out Item (BoI) Clearance	V 2.0	Subpart N, 21.N.3
51.	Form – 40A	Application for Clearance of Airborne Stores Imported from Foreign	V 2.0	Subpart N, 21.N.3, Subpart S, 21.S.2
52.	Form – 44	Defect Investigation Report Format	V 2.0	Subpart C, 21.C1.18, 21.C1.19
53.	Form – 45A	Servicing Instructions (SI)	V 2.0	Subpart L 21.L.3
54.	Form – 45B	Special Technical Instructions (STI)	V 2.0	Subpart L, 21.L.3
55.	Form – 45C	Urgent Operating Notice (UON)	V 2.0	Subpart L, 21.L.3
56.	Form – 50	Application for Production Organisation Approval	V 2.0	Subpart G2, 21.G2.1

Sl. No.	Form Number	Form Name	Form Version Number	Reference of IMTAR-21 Section
57.	Form – 51	Application for Significant Changes or Variation of Scope and Terms of Organisation Approval	V 2.0	Subpart G2, 21.G2.5
58.	Form – 52	Military Air System Statement of Conformity by Main Contractor	V 2.0	Subpart F, 21.F.16, 21.F.17
59.	Form – 53A	Application form for the Deviation Disposition during Design and Development	V 2.0	Subpart B, 21.B1.16, 21.B2.17, 21.B3.17, 21.B4.15 Subpart C, 21.C1.17, 21.C1.18, 21.C3.1.13, 21.C3.1.14, 21.C4.10, 21.C4.11
60.	Form – 53B	Application form for the Deviation Disposition / Production Permit During LSP / Production Phase (Deliverables) / Licensed Projects	V 2.0	Subpart F 21.F.21
61.	Form – 55	Production Organisation Approval Certificate	V 2.0	Subpart G2, 21.G2.1
62.	Form – 80	Design Organisation Approval Certificate	V 2.0	Subpart G1, 21.G1.2
63.	Form – 80A	Application for Design Organisation Approval (DOA)	V 2.0	Subpart G1, 21.G1.2
64.	Form – 82	Application for Significant Changes to Design Organisational Approval	V 2.0	Subpart G1, 21.G1.2 & 21.G1.6
65.	Form – 100	Flight Clearance Certificate for Air System	V 2.0	Subpart P, 21.P.10
66.	Form – 100A	Flight Clearance Certificate for Aircraft	V 2.0	Subpart P, 21.P.10
67.	Form – 100B	Flight Clearance Certificate for Helicopter	V 2.0	Subpart P, 21.P.10
68.	Form – 101	Flight Program Clearance Memo (FPCM)	V 2.0	Subpart P, 21.P.10
69.	Form – 1090	Certificate of Safety for Flight	V 2.0	Subpart P, 21.P.10, 21.P.4



FORM - 1 AUTHORISED RELEASE NOTE CERTIFICATE

In accordance with IMTAR-21, Subpart H, 21.H.2

1. DGAQA Approval Ref No. Date: Valid upto:	2. AUTHORISED RELEASE NOTE CERTIFICATE DGAQA Form AFQMS(F) – 1002	3. Release Note No.							
4. Consignor Organisation Name and address:	5. Consignee name and address:	6. Supply order / Contract / Work order Number:							
7. Item:	8. Description:	9. Part Number:	10. Specification	11. Quantity:					12. Identification mark of Inspector's Inspection stamp
				Qty on order	Acct. Unit	Qty tender	Qty Accepted	Total Qty Accepted Till date	13. Package, Marking & Remarks
<p>14. This certificate is issued under the approval granted by Director General of Aeronautical Assurance, Ministry of Defence, Govt. of India, New Delhi. It is certified that whole of the above mentioned material / goods / components manufactured / repaired / overhauled / serviced have been inspected and tested as per approved drawings / specifications and unless otherwise stated, confirm in all respect to the specifications in the contract / order referred</p> <div style="display: flex; justify-content: space-between; margin-top: 20px;"> <div style="text-align: center;"> <p>Verified by (Approved Inspector) With name, Inspection stamp and date</p> </div> <div style="text-align: center;"> <p>(Authorised Release Note Signatory) With name, stamp and date</p> </div> </div>									
User / Installer Responsibilities									
It is important to understand that the existence of the document alone does not automatically constitute authority to install the article on aircraft / aero-engine / System.									



FORM - 2 APPLICATION FOR MAINTENANCE ORGANISATION APPROVAL

Guidelines for Completion of the IMTAR Form 2

Block 1: Registered name and address of the organisation

The name of the organisation must be entered as stated in the register of the Companies Registration Office. For the initial application a copy of the entry in the register of the Companies Registration Office must be provided to the competent authority.

Block 2: Trade name (if different)

State the trade name by which the organisation is known to the public if different from the information given in Block 1. The use of a logo may be indicated in this Block.

Block 3: Locations for which the approval is applied for

State all locations for which the approval is applied for. Only those locations must be stated that are directly under the control of the legal entity stated in Block 1.

Block 4: Brief summary of proposed activities at the item 3 addresses

This Block must include further details of the activities under the approval for the addresses indicated in Block 3. The Block 'General' must include overall information, while the Block 'Scope of approval' must address the scope of work and products/categories following the principles laid down in IMTAR-21. The Block 'nature of privileges' must indicate the requested privileges as defined in IMTAR 21.

Block 5: Description of Organisation

This Block must state a summary of the organisation with reference to the outline of the production organisation exposition, including the organisational structure, functions and responsibilities. The nomination of the responsible managers in accordance with IMTAR 21 must be included as far as possible

Block 6: Links/arrangements with design approval holder(s)/design organisation(s) where different from 1

The information entered here is essential ascertaining the flow of relevant technical information and for the evaluation of eligibility of the application. Therefore special attention must be given concerning the completion of this Block either directly or by reference to supporting documentation in relation to the requirements of IMTAR 21.

Block 7: Approximate number of staff engaged or intended to be engaged in the activities

The information to be entered here must reflect the number of staff, or in case of an initial approval the intended number of staff, for the complete activities to be covered by the approval and therefore must include also any associated administrative staff.

Block 8: Position and name of the Accountable Manager

State the position and name of the Accountable Manager

Block 9: Details of Management Personnel:

State the name and qualification details of the Accountable Manager (AM) and Quality Department Head (QDH) in Form 4.



FORM - 2A

APPLICATION FOR SIGNIFICANT CHANGES OR VARIATION OF SCOPE AND TERMS OF MAINTENANCE ORGANISATION APPROVAL

In accordance with IMTAR-21, Subpart G3, 21.G3.4

Note: This Form to be provided along with Form F1001, Appendix A of AFQMS 2018, Issue-II

**DIRECTORATE GENERAL OF AERONAUTICAL QUALITY
ASSURANCE (DGAQA)
GOVERNMENT OF INDIA, MINISTRY OF DEFENCE
'H' BLOCK, NEW DELHI-110011**

1. Name and address of the Approval holder	
2. Approval reference number	
3. Locations for which changes in the terms of approval are requested	
4. Brief summary of proposed changes to the activities at the Block 3 addresses	
a) General	
b) Scope of approval	
c) Nature of privileges	
5. Description of organisational changes	
6. Position and name of the Accountable Manager or nominee	
_____	_____
Date	Signature of the Accountable Manager (or nominee)



FORM - 2A

APPLICATION FOR SIGNIFICANT CHANGES OR VARIATION OF SCOPE AND TERMS OF MAINTENANCE ORGANISATION APPROVAL

Guidelines for Completion of the Form - IMTAR Form 2A

Block 1: Name and address of the Organisation Approval holder

The name must be entered as written on the current approval certificate. Where a change in the name is to be announced state the old name and address here, while using Block 5 for the information about the new name and address. The change of name and/or address must be supported by evidence, e.g. by a copy of the entry in the register of companies.

Block 2: Approval reference number

State the current approval reference number.

Block 3: Locations for which changes in the terms of approval are requested

State the locations for which changes in the terms of approval are requested or state 'not applicable' if no change is to be anticipated here.

Block 4: Brief summary of proposed changes to the activities at the item 3 addresses

This Block should include further details for the variation of the scope of approval for the addresses indicated in Block 3. The Block 'General' must include overall information for the change (including changes e.g. in workforce, facilities etc.), while the Block 'Scope of approval' must address the change in the scope of work and products/categories following the principles laid down in the IMTAR 21. The Block 'nature of privileges' must indicate a change in the privileges as defined in IMTAR 21. State 'not applicable' if no change is anticipated here.

Block 5: Description of organisational changes

This Block must state the changes to the organisation as defined in the current production organisation exposition, including changes the organisational structure, functions and responsibilities. This Block must therefore also be used to indicate a change in the Accountable Manager in accordance with IMTAR 21 or a change in the nomination of the responsible managers in accordance with IMTAR 21. State 'not applicable' if no change is anticipated here.

Block 6: Position and name of the Accountable Manager or nominee

State the position and name of the Accountable Manager here. Where there is a change in the nomination of the Accountable Manager, the information must refer to the nominee for this position. State 'not applicable' if no change is anticipated here.

In case of an application for a change of the accountable manager the IMTAR Form 2A must be signed by the new nominee for this position. In all other cases the IMTAR Form 2A must be signed by the Accountable Manager.



FORM - 3 MAINTENANCE ORGANISATION APPROVAL CERTIFICATE

In accordance with IMTAR-21, Subpart G3, 21.G3.4

Note: This format is made Optional / Not Mandatory, Format of POA (Form 55) can be used to cover MOA Certificate by DGAQA

[DGAQA, Ministry of Defence, Govt of India]

MAINTENANCE ORGANISATION APPROVAL CERTIFICATE

Reference: [.....]

Pursuant to IMTAR-21 regulation and subject to the conditions specified below, the DGAQA hereby certifies

[COMPANY NAME AND ADDRESS]

As a maintenance organisation in compliance with IMTAR 21, Subpart G, approved for Maintenance of products, parts and appliances listed in the attached approval schedule and issue related certificates using the above references.

CONDITIONS:

1. This approval is limited to that specified in the enclosed terms of approval, and
2. This approval requires compliance with the procedures specified in the approved Maintenance organisation exposition, and
3. This approval is valid whilst the approved Maintenance organisation remains in compliance with IMTAR 21.
4. Subject to compliance with the foregoing conditions, this approval shall remain valid for --- Years or an unlimited duration unless the approval has previously been surrendered, superseded, suspended or revoked.

Date of original issue:

Date of this revision:

Revision No:

Signed:

For DGAQA:



FORM - 3 MAINTENANCE ORGANISATION APPROVAL CERTIFICATE

[DGAQA, Ministry of Defence, Govt of India]	Terms of Approval	Ref:[.....]
This document is part of Maintenance Organisation Approval Number [.....]:		
Company name:		
Section 1. SCOPE OF WORK		
REPAIR / MAINTENANCE OF	PRODUCTS / CATEGORIES	
For details and limitations refer to the Maintenance Organisation Exposition, Sectionxxx		
Section 2. LOCATIONS		
Section 3. PRIVILEGES		
The Maintenance Organisation is entitled to exercise, within its Terms of Approval and in accordance with the procedures of its Maintenance Organisation Exposition, the privileges set forth in IMTAR 21 Subject to the following:		
<i>[keep only applicable text]</i>		
Prior to approval of the design of the product an IMTAR Form 1 or Equivalent may be issued only for conformity purposes.		
A Statement of Conformity may not be issued for a non-approved aircraft		
Maintenance may be performed, until compliance with maintenance regulations is required, in accordance with the Maintenance Organisation Exposition Section _____ xxx		
Flight Clearance may be issued in accordance with the Maintenance Organisation Exposition Section _____ yyy		
Date of original issue	Signed:	
Date of this revision		
Revision No.	For DGAQA	



FORM - 4 APPLICATION FOR APPROVAL OF MANAGEMENT PERSONNEL

In accordance with IMTAR-21, Subpart G1, G2, G3

1. Organisation :
2. Organisation Reference :
3. Name :
4. Contact Details :
5. E-Mail Address :
6. Positions within the Organisation:
 - DOA:HOD COA CISM/QDH
 - MOA: AM QM
 - POA:QDH AM (Refer, para 1.1,1.2 &1.3 of Section-III, PART – I of AFQMS 2018, Issue-II)
7. Qualifications relevant to position at Item 6:
 - a.....
 - b.....
 - c.....
8. Work experience relevant to the position at Item 6: (Use continuation sheet if necessary):
9. List any supporting documents submitted (not originals):
 - a.....
 - b.....
 - c.....
10. Post Holder Declaration:

I declare that the information provided on this form is true and correct

I understand and accept that for CEMILAC / DGAQA to proceed with this application, I have supplied all supporting documentation to CEMILAC/DGAQA
11. Applicants Signature
12. Date

HOD: Head of Design

COA: Chief of Airworthiness

CISM: Chief of Independent Support Monitoring / QDH: Quality Department Head

AM : Accountable Manager

QM : Quality Manager

DOA: Design Organisation Approval

POA: Production Organisation Approval



FORM - 10

APPLICATION FOR AIRWORTHINESS ASSESSMENT OF AIR SYSTEM / AIRBORNE STORES

In accordance with IMTAR - 21, Subpart B, 21.B1.4, 21.B2.5, 21.B3.5, 21.B4.4 Subpart C, 21.C1.4, 21.C1.5, 21.C2.3, 21.C2.4, 21.C3.1.4, 21.C3.1.5, 21.C4.2, 21.C4.3, 21.C6.1.2, 21.C6.1.3

1. Reference		
1.1 Applicant's Reference		Date
2. Applicant's Information		
2.1 Applicant Company Data		
2.1.1 Name and Address (As per Registration with Registrar of Companies, India) Companies Act, 2013	Applicant Number	
	(Company) Name	
	Door/Street / Area	
	Post Office	
	City / State	
	PIN	
2.1.2 Contact Person (Responsible for this application)	Title	<input type="checkbox"/> Mr <input type="checkbox"/> Ms <input type="checkbox"/> Dr
	Name	
	Last Name	
	Job title	
	Phone/Fax	
	Email (Official)	
2.2 Address for Communication		
2.2.1 Address (Required for communication with regard to this application)	(Company) Name	
	Door/Street / Area	
	Post Office	
	City / State	
	PIN	
2.3 Organisation Approval Details		
2.3.1 DOA Details (if applicable)	DOA Number	
	DOA Validity	
	DOA Scope	



FORM - 10

APPLICATION FOR AIRWORTHINESS ASSESSMENT OF AIR SYSTEM / AIRBORNE STORES

2.3.2 POA Details (if applicable)	POA Number	
	POA Validity	
	POA Scope	
3. Air System Description		
3.1 Name of the Air System	Not exceeding 30 words.	
3.2 Brief about the Project	Not exceeding 100 words. Shall include details of Air System, hardware and software / CEH aspects (if applicable). Please add enclosure for additional details	
3.3 Proposed IMTAR Sub-part	<input type="checkbox"/> 21.B1 <input type="checkbox"/> 21.B2 <input type="checkbox"/> 21.B3 <input type="checkbox"/> 21.B4 <input type="checkbox"/> 21.C1 <input type="checkbox"/> 21.C2 <input type="checkbox"/> 21.C3 <input type="checkbox"/> 21.C4 <input type="checkbox"/> 21.C5 <input type="checkbox"/> 21.C6	

4. Applicant's Declaration

I declare that I am authorized by my Organisation to submit this application to CEMILAC and that all information provided in this application form is correct and complete.

I acknowledge that I have read and understood the IMTAR – 21.

I understand that the submission of the application does not entitle certification coverage by CEMILAC.

Place		
Date	Name of the Authorised Signatory	Signature

Important Note: CEMILAC does not accept applications without signature. Please make sure that the application is signed and official seal stamped.

This Application should be sent by fax, e-mail or regular mail to :

The Chief Executive (Airworthiness)

Centre for Military Airworthiness & Certification (CEMILAC)

Defence R&D Organisation, Ministry of Defence

Marathahalli Colony Post,

Bengaluru - 560037

Fax +91 (0)80 25230856

E-mail : ce.cemilac@gov.in



FORM - 10

APPLICATION FOR AIRWORTHINESS ASSESSMENT OF AIR SYSTEM / AIRBORNE STORES

Acknowledgement of Receipt of Application

1. Applicant's Reference	Date	
2. Address (Required for communication with regard to this application)	(Company) Name	
	Door / Street / Area	
	Post Office	
	City / State	
	PIN	
3. Air System Title		

The application has been received on _____. The application will be reviewed and status will be informed in due course of time.

CEMILAC
For Chief Executive (Airworthiness)



FORM - 11A

APPLICATION FOR ISSUE OF RSD

In accordance with IMTAR - 21, Subpart B, 21.B1.21, 21.B2.22, 21.B3.23, 21.B4.21

Issue of RSD Under RMTC MTC SMTC
 User Service IAF IN IA INCG

1. Reference		
1.1 Applicant's Reference		Date:
2. Applicant's Information		
2.1 Applicant Company Data		
2.1.1 Name and Address (As per Registration with Registrar of Companies, India) Companies Act, 2013	Applicant Number	
	(Company) Name	
	Door/Street / Area	
	Post Office	
	City / State	
	PIN	
2.1.2 Contact Person (Responsible for this application)	Title	<input type="checkbox"/> Mr <input type="checkbox"/> Ms <input type="checkbox"/> Dr
	Name	
	Last Name	
	Job title	
	Phone/Fax	
	Email (Official)	
2.2 Address for Communication		
2.2.1 Address (Required for communication with regard to this application)	(Company) Name	
	Door/Street / Area	
	Post Office	
	City / State	
	PIN	
2.3 Organisation Approval Details		
2.3.1 DOA Details (if applicable)	DOA Number	
	DOA Validity	
	DOA Scope	



FORM - 11A

APPLICATION FOR ISSUE OF RSD

3. Air System Description	
3.1 Air System Identification	
3.1.1 Air System Type Number / Part Number	
3.1.2 Air System Nomenclature	
3.2 CEMILAC Project Code	
3.3 Brief about the Project	Not exceeding 100 words. Please add enclosure for additional details
3.4 Proposed IMTAR Sub-part	<input type="checkbox"/> 21.B1 <input type="checkbox"/> 21.B2 <input type="checkbox"/> 21.B3 <input type="checkbox"/> 21.B4
3.5 RMTC / MTC Number	

4. Air systems Requirements Details	
4.1 Staff Requirements	If applicable
4.2 Airworthiness Certification Criteria	
4.3 Air system Requirement Specification	
4.4 Type Certification Basis	
4.5 Airworthiness Certification Plan	

5. Air Systems Configuration	
5.1 Standard of Preparation	
5.2 Standard of Equipment	



FORM - 11A APPLICATION FOR ISSUE OF RSD

6. Air Systems Type Certification Compliance	
6.1 TCB Compliance	
6.2 Limitations List	
6.3 Type Certificate Data Sheet (TCDS)	

7. Release to Service Details	
7.1 User Acceptance Letter	
7.2 List of Technical and Flight Publications	Add as enclosure
7.3 RSD Document Reference	

8. Applicant's Declaration		
I declare that I am authorized by my Organisation to submit this application to CEMILAC and that all information provided in this application form is correct and complete.		
I acknowledge that I have read and understood the IMTAR – 21.		
I understand that the submission of the application, by itself, does not entitle RSD.		
Place		
Date	Name of the Authorised Signatory	Signature
Important Note: CEMILAC does not accept applications without signature. Please make sure that the application is signed and official seal stamped.		

Note: This application along with the required documents shall be forwarded to dealing RCMA / CEMILAC for further process.



FORM - 11A APPLICATION FOR ISSUE OF RSD

Acknowledgement of Receipt of Application

1. Applicant's Reference	Date:	
2. Address (Required for communication with regard to this application)	(Company) Name	
	Door/Street / Area	
	Post Office	
	City / State	
	PIN	
3. Air System Title		

The application has been received on _____. The application will be reviewed and status will be informed in due course of time

CEMILAC
For Chief Executive (Airworthiness)
Seal



FORM - 12

CERTIFICATE OF DESIGN

In accordance with IMTAR- 21, Subpart B, 21.B1.15, 21.B2.16, 21.B4.14, 21.B4.18 & Subpart C, 21.C1.24, 21.C1.25

For issue of FCC MTC TA

1. Reference		
1.1 Applicant's Reference		Date:
2. Applicant's Information		
2.1 Applicant Company Data		
2.1.1 Name and Address (As per Registration with Registrar of Companies, India) Companies Act, 2013	Applicant Number	
	(Company) Name	
	Door/Street / Area	
	Post Office	
	City / State	
	PIN	
2.1.2 Contact Person (Responsible for this application)	Title	<input type="checkbox"/> Mr <input type="checkbox"/> Ms <input type="checkbox"/> Dr
	Name	
	Last Name	
	Job title	
	Phone/Fax	
	Email (Official)	
2.2 Address for Communication		
2.2.1 Address (Required for communication with regard to this application)	(Company) Name	
	Door/Street / Area	
	Post Office	
	City / State	
	PIN	
2.3 Organisation Approval Details		
2.3.1 DOA Details (if applicable)	DOA Number	
	DOA Validity	
	DOA Scope	
3. Air System/Airborne Stores Description		
3.1 Air System/Airborne Stores Identification		



FORM - 12

CERTIFICATE OF DESIGN

3.1.1 Air System/ Airborne Stores Type Number / Part Number	
3.1.2 Air System/ Airborne Stores Nomenclature	
3.2 CEMILAC Project Code	
3.3 Brief about the Project	Not exceeding 100 words. Please add enclosure for additional details
3.4 IMTAR Sub-part	<input type="checkbox"/> 21.B1 <input type="checkbox"/> 21.B2 <input type="checkbox"/> 21.B3 <input type="checkbox"/> 21.B4 <input type="checkbox"/> 21.C1

4. Air System/Airborne Stores Requirements Details	
4.1 Staff Requirements	If applicable
4.2 Airworthiness Certification Criteria	
4.3 Air System Requirement Specification/ Technical Specification of Airborne Stores	
4.4 Type Certification Basis/Type Approval Basis	
4.5 Airworthiness Certification Plan	

5. Air System/Airborne Stores Configuration	
5.1 Standard of Preparation	
5.2 Standard of Equipment (only for Air system)	



FORM - 12 CERTIFICATE OF DESIGN

6. Air System/Airborne Stores Type Certification Compliance	
6.1 TCB Compliance/ TAB Compliance	
6.2 Limitations List	
6.3 Type Certificate Data Sheet/Type Approval Data Sheet	

7. Applicant's Declaration		
We, _____ (Name of Design firm) hereby declare and certify:		
i. That the afore mentioned Air system/Airborne Stores is defined and accurately described by the above particulars and that it complies with the full requirements/experimental flight requirements subject to the exceptions mentioned in the compliance		
ii. That all relevant design data, reports of specified tests, drawings and drawing lists have been completed and are a true record of the design and testing of the Stores to date.		
iii. That if any statement on this certificate becomes inaccurate the certificate will be suitably amended and issued.		
Place		
Date	Name of Head of Design	Signature
Important Note: CEMILAC does not accept applications without signature. Please make sure that the application is signed and official seal stamped.		



FORM - 20

ENGINEERING CHANGE NOTE (ECN)

In accordance with IMTAR-21, Subpart B, 21.B.13, 21.B.2.14, Subpart C, 21.C1.12, 21.C1.13, 21.C4.12, 21.C4.13

1. Reference

1.1 Applicant's Reference		Date:
----------------------------------	--	--------------

2. System / LRU Description

2.1 Program / Project	
2.2 System / Sub Sytem	
2.3 LRU Description	
2.4 Part No. / Model No. with Rev/ mod status	
2.5 Software version No. (if applicable)	
2.6 Agency responsible to supply	

3. Documentation Details

List of Documents (Approved Earlier)

Sl. No.	Document Title	Ref Doc	Document Control number	Rev. No.	Date of release
3.1					
3.2					
3.3					
3.4					

4. Change Details

4.1 Reason for Change / Origin: Qualification Test / Ground Test on A/c / Flight Test

4.2 Description of Design Change Proposed

4.3 Authority of Change

4.4 Applicability of Change State YES / NO If any answer is YES particulars are to be attached

a. Interchangeability of Post-Mod & Pre-Mod Spares affected	Yes / No
b. Accessibility affected	Yes / No
c. Maintainability affected	Yes / No



FORM - 20 ENGINEERING CHANGE NOTE (ECN)

d.	Documentation affected?	Yes / No
e.	Drawing Changes	Yes / No
f.	Total No. of unit on which the change will be embodied	
g.	New Parts required	Yes / No
h.	Weight change	Yes / No, then weight after change _____
i.	Dimensions Change	Yes / No
j.	Change in Power requirement	Yes / No, Power required after change _____
k.	Any other aspect	Yes / No

5. Comments / Remarks / Enclosures :	
Proposed by	_____ (Signature, Name and Contact Number)
Reviewed and recommended by PD/PgD/HoD	_____ Project Director /Program Director/Head of Design (Name and Signature or Seal)
Verified by	_____ Quality Dept. Head / Airworthiness Group (Name and Signature)
Approved by	_____ CEMILAC / RCMA (Name and Signature with Seal)



FORM - 20

ENGINEERING CHANGE NOTE (ECN)

Instructions for filling ECN	
Item#	Description
1.	ECN Reference number to be issued by Designer Group in the format Orgn / Div. No. / ECN / XYZ / XXX dated DD/MM/YYYY. XYZ is LRU abbreviation is same as in SOP. XXX is three-digit control number. Date of proposal of ECN is to be as per format DD / MM / YYYY. If the second change has been proposed in ABCD in PQRS Aircraft on DD/MM/YYYY, then Reference number is “Orgn/Div.23/ECN/ABCD/002 dt DD/MM/YYYY.
2.	Write description of the Project or program.
3.	Write description of the system or subsystem.
4.	Write the nomenclature of LRU. The LRU nomenclature should be as per Program / Project SOP.
5.	Write Part Number or Model Number as per SOP and is to be same as engraved on the LRU.
6.	Software details of Airborne Stores if applicable.
7.	The manufacturing Agency or Agency responsible for modification of item.
8.	Document Control number with revision No. & date of approval of the document is to be specified. The Original Document shall be brought for ECN verification by Quality Dept.
9.	Write down the proposed changes to the existing System / LRU / SRU.
10.	Briefly explain the reason for changes to the design.
11.	Reference of the authority for carrying out the Engineering Change is to be brought out (DIC, NCRC or additional requirements from User through Project Monitoring Board.
12.	Where all the changes shall be applicable needs to be brought out clearly. Select suitable option.
13.	Remarks if any and the references of the enclosures if any (Process Sheet / Task Card / Work Order / Drawing / Authority of Change Note / Others) to be recorded.
14.	Design Rep proposing the change shall sign and confirm the details filled from Sl. no. 1 to 12. Name and contact number of Designer Rep proposing the change to be given.
15.	Project Director / Program Director to review the Changes in design and only forward the recommended ECN to QCG office along with original document. If the ECN sent for reverification, then previous version ECN (verified) also to be forwarded along with modified ECN.
16.	The Head QC shall verify and sign the ECN.
	NOTE: Electronic signature may be used. In this case, the following text can be added: “signature on file” or “electronic signature available”, or similar statement.
Additional Instructions	
a. The ECN shall be raised by Design Rep for change in design and is to be signed with Date & Time. All entries must be filled properly by Designer and must be legible, else it shall not be accepted.	
b. Minor changes in the document will be modified through Amendment.	
c. The Engineering Change Control Number shall be issued by Head QC or Rep of QC as per format. Orgn/ECN/ ABCD/XYZ/XXX dt DD/MM/YYYY . ABCD stands for Program or Project, XYZ stands for Airborne Stores description, XXX is 3-digit number.	
d. Any modification/correction needs to be signed by respective PD / PgD / HoD.	
e. All signatories should legibly write their name, designation and date of signature.	



FORM - 21A

DESIGN CRITERIA FORM FOR METALLIC MATERIAL/ SEMI-FINISHED METALLIC COMPONENT

In accordance with IMTAR-21, Subpart C3, 21.C3.1.9, 21.C3.1.10

Reference

Applicant's Reference

Date:

Project : Material Grade & Mill form :
 Name of Inspection Agency : Heat Treatment Condition :
 Name of Developing/ : Size (mm) :
 Manufacturing Agency : Supply Condition :
 Manufacturing Process Route :

Sl. No.	Component	Classification	Stress Condition with the magnitude			Environmental Conditions	Temperature Conditions	Weldability requirements*	Any other information
			Primary	Secondary	Static/ Dynamic loading conditions				
		Critical/ Non critical	Eg. Fracture Toughness, Fatigue, YS, UTS	Eg. Fracture Toughness, Fatigue, YS, UTS			*Type of Welding, No. of joints, Components details which are to be welded, Material type, WPS & PQR Status approved or not? Vendor details		

Enclosures:

1. Brief write-up about the Project
2. End use of the Components along with justification for classification
3. Drawings, photographs of components
4. QA Plan

Signature
Name & Designation
Name of Organisation (with Seal)

Countersigned by CEMILAC

Version : 2.0

Date: August 2023



FORM - 21B

DESIGN CRITERIA FORM FOR CARBON-CARBON AIRCRAFT BRAKE DISCS

In accordance with IMTAR-21, Subpart C3, 21. C3.1.9, 21.C3. 1.10

Reference

Applicant's Reference

Date:

Project : Material :
 Name of Inspection Agency : Manufacturing Process Route :
 Name of the Developing/Manufacturing Agency: Supply Condition :
 Nominal Dimensions :

Sl. No.	Component Name	Classification	Material Property Requirements	Service Conditions	Environmental and Temp Conditions	Requirements of Metallic Attachments, if any	Any other information
			Physical, Mechanical, Thermal, Friction and Wear				
		Critical/ Non critical	e.g., Physical Properties: Density, Porosity, etc. Mechanical Properties: Flexural Strength, Tensile Strength, Compressive Strength, Shear Strength, Interlaminar Shear Strength, etc. Thermal Properties Specific Heat, Thermal Diffusivity, Thermal Conductivity, CTE, Weight Loss by TGA (Bare + with Anti-Oxidant Coating), etc. Friction and Wear Properties on Brake Dynamometer Co-efficient of Friction, Wear (Thickness Loss), etc.	Kinetic Energy (Normal, Overload, RTO), Brake Application Speed, Brake Pressure, Stop Time, Static Torque, Temperature Rise, Wear (Thickness Loss) etc.			

Enclosures:

1. Brief write-up about the Project
2. End use of the Components along with justification for classification
3. Drawings, photographs of components
4. QA Plan

Signature
 Name & Designation
 Name of Organisation (with Seal)

Countersigned by CEMILAC

Version : 2.0

Date: August 2023



FORM - 21C

DESIGN CRITERIA FORM FOR COMPOSITES/ CERAMIC COMPONENTS

In accordance with IMTAR – 21, Subpart C3, 21.C3.1.9, 21.C3. 1.10

Reference

Applicant's Reference

Date:

Project : Material :
 Name of Inspection Agency : Manufacturing Process Route :
 Name of the Developing/Manufacturing Agency: Supply Condition :
 Nominal dimension of the component (if applicable):

Sl. No.	Component Name	Classification	Material Property Requirements	Environmental Conditions	Temperature Conditions	Other Property Requirements (Physical, Thermal, Electromagnetic, Rain-erosion, etc.)	Any other information
			Based on Static/ Dynamic loading conditions				
		Critical / Non critical	Eg. Tensile Strength & Modulus, Flexural Strength & Modulus, Compressive Strength & Modulus Fracture Toughness, Fatigue, etc.			Density, Porosity, Specific Heat, Thermal conductivity, CTE, Moisture absorption co-efficient, Weight Loss (TGA), Tangent Loss, Dielectric Constant, etc	

Enclosures:

1. Brief write-up about the Project
2. End use of the Components along with justification for classification
3. Drawings, photographs of components
4. QA Plan

Signature
 Name & Designation
 Name of Organisation (with Seal)

Countersigned by CEMILAC

Version : 2.0

Date: August 2023



FORM - 21E

DESIGN CRITERIA FORM/ INPUT DATA SHEET FOR NON METALLIC MATERIALS AND COMPONENTS, PAINTS AND COATINGS

In accordance with IMTAR-21, Subpart C3, 21.C3.1.9, 21.C3. 1.10

Reference

Applicant's Reference		Date
------------------------------	--	-------------

Project

Material

Name of Inspection Agency

Manufacturing Process Route

Name of the Developing/Manufacturing Agency

Supply Condition

Nominal dimension of the component (if applicable)

1.	Reference No.	Date
2.	Nomenclature of the Product	
3.	Governing Specification	
4.	Brief description of application of part/End use	
5.	Criticality of part	
6.	Operating medium	
7.	Operating temperature or temperature exposed	
8.	List of main functional test carried out	
9.	Any post treatment in the part before assembly	

Enclosures

1. Brief write-up about the Project
2. End use of the Components along with justification for classification
3. Drawings, photographs of components
4. QA Plan

Signature
Name & Designation
Name of Organisation (with Seal)

Countersigned by CEMILAC

Version : 2.0

Date: August 2023



FORM - 21F INPUT DATA SHEET FOR FUEL, OIL AND LUBRICANTS (FOL)

In accordance with IMTAR-21, Subpart C3, 21.C3.1.9, 21.C3. 1.10

Reference

Applicant's Reference

Date:

1	Nomenclature of FOL Stores	
2	User Reference, if applicable	
3	Criticality class	
4	OEM extract / maintenance manual with end use details, specification / properties etc.	
5	Category	
	Indigenization, licensed production, Imported products	
6	Shelf life / storage requirements	
7	Packaging Conditions	
8	Other applicable information, if any	

Signature
Name & Designation
Name of Organisation (with Seal)



FORM -21G

APPLICATION FORM FOR LETTER OF APPROVAL (LOA) FOR MATERIALS

In accordance with IMTAR-21, Subpart C3, 21.C3.1.9, 21.C3. 1.10

Reference

Applicant's Reference

Date:

1. Name of the Firm :
2. Address :
 - i. Office :
 - ii. Work :
3. Item for which LoA is being sought, together :
With the trade name, if any
4. Governing Specification of the Material/ Item :
5. Description of Material/ Item together with technical Literature :
and drawing (if applicable) (copy of literature/ drawing Enclosed)
6. Information regarding technical collaboration / license :
Manufacture
7. End use of the material/item with particular reference to aircraft :
Industry
8. Details of the test carried out and reports released by the :
Firm to ascertain the properties and utility of the material/item
9. Scope and extend of LoA sought :
10. List of other items and Specification thereof which the firm :
have developed/ manufactured and organisation to
which the item has been supplied

Signature of the Applicant:

Designation:

Date:

Address:



FORM - 22B

SOFTWARE PROBLEM REPORT (SPR)

In accordance with IMTAR-21, Subpart C6, 21.C6.1.16, 21.C6.1.17

SPR No. and Date :

System	Software CSCI Name	
LRU Name	Software Version	
Platform	Check sum	
Originator <input type="checkbox"/> Design <input type="checkbox"/> Customer / User	Supporting software used	Compatible Hw Ver & part no. :
Problem Reported during : <input type="checkbox"/> Service Use <input type="checkbox"/> Development Flight Trials <input type="checkbox"/> Taxi Trials <input type="checkbox"/> Aircraft integration <input type="checkbox"/> Rig integration <input type="checkbox"/> System integration <input type="checkbox"/> LRU Lab testing		
Problem Description :		
References : (Flight feedback / rig report / test report)		
Severity of the Problem : <input type="checkbox"/> Critical, Urgent <input type="checkbox"/> Critical, Not Urgent <input type="checkbox"/> Non Critical, Urgent <input type="checkbox"/> Non Critical, Not Urgent		
Confirmation of the Software Problem on bench and rigs : <input type="checkbox"/> Confirmed <input type="checkbox"/> Intermittent <input type="checkbox"/> Not Confirmed <input type="checkbox"/> Not able to recreate the reported issue		
Remarks :		
Rep Design	Rep Design QA	



FORM - 22C

APPLICATION / REQUEST FOR SOFTWARE CLEARANCE

In accordance with IMTAR-21, Subpart C6, 21.C6.1.17, 21.C6.1.18

Application No. & Date :

Clearance Request for Ground Integration Flight trials Production Service Use

1	System		
2	Platform		
3	Name and Address of the LRU design agency		
4	Name and Address of the Software developing agency		
5	Name of the LRU		
6	Compatible Hw Version & part no. of the LRU		
7	Programmable components in the LRU	CSCI/CEH/PDI Name	Check sum
8	Software Item changed in the current version		
9	New Software Version (s) & Check sum (s)		
10	Software Development Standard		
11	Functional Requirement Specification		
12	Bus ICD		
13	Software Requirement Specification		
14	Software Test Cases and Procedures		
15	Software Test Report		
16	Software Verification Records		
17	Software QA Report		
18	Version Description Document		
19	Test rig / ATE software version		
20	SPR, SCR and SCN Ref.		
21	IV & V Recommendation		
22	TARB Report (as applicable)		
23	Limitations, if any		

(Signature & Seal of the Applicant)

Version : 2.0

Date: August 2023



FORM - 22D

APPLICATION / REQUEST FOR CEH CLEARANCE

In accordance with IMTAR-21, Subpart C6, 21.C6.2.7, 21.C6.2.8

Application No. & Date :

Clearance Request for Ground Integration Flight trials Production Service Use

1	System		
2	Platform		
3	Name and Address of the LRU design agency		
4	Name and Address of the CEH developing agency		
5	Name of the LRU		
6	Compatible Hw Version and Part No. of the LRU		
7	Programmable components in the LRU	CEH Name	Check sum
8	CEH Item changed in the current version		
9	New CEH Version(s) & Check sum(s)		
10	CEH development Standard		
11	CEH Requirement Specification		
12	CEH Test Cases and Procedures		
13	CEH Test Report		
14	CEH analysis verification reports		
15	Hardware Configuration Index		
16	Test rig / ATE software version		
17	SPR, SCR and SCN Ref.		
18	IV & V Recommendation		
19	TARB Report		
20	Limitations		

(Signature & Seal of the Applicant)

Version : 2.0

Date: August 2023



FORM - 22E APPLICATION / REQUEST FOR IP CORE LOA (TO BE FILLED IN BY IP DEVELOPER)

In accordance with IMTAR-21, Subpart C6, 21.C6.2.8

1	Name of the IP Developer	
2	Address of the IP Developer	
3	Nomenclature of the IP core	
4	Part number of the IP core for which the LoA is sought	
5	Version number of the IP core	
6	Brief description of the IP core	
7	Reference of the IP data sheet	
8	Certification doc References	
9	Remarks	

Place:

Date:

Signature of the applicant

Name, Designation

Organisation name



FORM - 22F FORMAT FOR IP CORE DATA SHEET (TO BE FILLED IN BY IP DEVELOPER)

In accordance with IMTAR-21, Subpart C6, 21.C6.2.8

1	Name of the IP Developer	
2	Address of the IP Developer	
3	Nomenclature of the IP core	
4	Part number of the IP core for which the LoA is sought	
5	Brief description of the IP core	
6	DAL level	
7	Category Hard/Firm/Soft	
8	Target Hardware ICs details	
9	Limitations	
10	Document References	
11	Remarks	

Signature of the Certification Authority
Name, Designation
Organisation name

Signature of the applicant
Name, Designation
Organisation name



FORM - 22G

FORMAT FOR IP CORE CERTIFICATION OF DESIGN BY IP DEVELOPER (TO BE FILLED IN BY IP DEVELOPER)

In accordance with IMTAR-21, Subpart C6, 21.C6.2.8

1	Name of the IP Developer	
2	Address of the IP Developer	
3	Nomenclature of the IP core	
4	Part number of the IP core for which the LoA is sought	
5	Brief description of the IP core	

We(<IP Developer>), hereby declare and certify:

- i That the afore mentioned IP core is defined and accurately described by the above particulars fully complying with the requirements given in document<FRD, **CEH Requirements Specification** reference with date> subject to the limitations listed in< IP core data sheet with date>.
- ii That all relevant design data, test reports have been completed and are a true record of the design and testing of the IP cores.
- iii That if any statement on this certificate become inaccurate the certificate will be invalid

Place:

Date:

Signature of the applicant

Name, Designation

Organisation name



FORM - 22J SOFTWARE CHANGE NOTE (SCN)

In accordance with IMTAR-21, Subpart C6, 21.C6.1.16, 21.C6.1.17, 21.C6.1.18

SCN No. and Date :

System	Old Software	New Software
LRU Name	Version	Version
Platform	Check sum	Check sum
Software Change Request Reference	Supporting software used	Compatible Hw Ver & Part No. :
Software Changes carried out from the Previous version to current version		
Test case document used for regression testing		
Change Evaluation Reports		
V&V/ IV&V report		
TARB report (If applicable)		
Changed Documents approval status		
Limitations/ Known problems		
Recommended Scope of software clearance		
Verified by (Rep CEMILAC)		Approved by (Competent Authority)*

*Competent authority for approval of Software Change Note can be RD RCMA, Chairman of IV&V team or Chairman of Software Evaluation Committee, as decided in the certification plan approved by CEMILAC.



FORM -23 DECLARATION OF DESIGN AND PERFORMANCE OF AIRBORNE STORES

b) Power supply compatibility tests

(NOTE: The “categories” referred to are those listed in the current issue of MIL-STD-704, RTCA DO-160 or other military equivalent standard).

c) Other relevant tests

10. A statement of criticality of software or “None” if not applicable.

(NOTE: Software levels are those defined in the current issue of DSSD / RTCA document DO-178 B/C or other equivalent)

11. A statement of design assurance level for complex hardware or a statement indicating whether complex hardware is embedded or not in the product.

(NOTE: Complex hardware design assurance levels are those defined in the applicable issue of RTCA document DO-254 or other equivalent methodology followed.)

12. The declaration in this document is made under the authority of

_____ (name of Manufacturer)

(Manufacturer’s name) cannot accept responsibility for equipment used outside the limiting conditions stated above without their agreement.

Date: _____ Signature _____ (Manufacturer’s Approved Head of Design by CEMILAC)



FORM - 25 SIGNALING OUT CERTIFICATE FOR AN AIR SYSTEM

In accordance with IMTAR-21, Subpart H, 21.H.2, 21.H.5

Ref. No.

Date :

To

User Service HQrs

IAF/ IA/ IN/ ICG

SIGNALING OUT AIR SYSTEM _____ (TYPE), TAIL NUMBER (_____)
After _____ (Mfg / Upgrade / Servicing / Overhaul)

Sir,

With reference to Service HQ. Contract / SO / Task order No.: dated, It is intimated that the subject Air System, is hereby signalled out as per the details given below:

I. Basis of Clearance :

- a) Approved RSD / SOP / SOE approved by RCMA vide ref. Number with date
- b) CEMILAC approved RMTC / MTC Number with date
- c) Main Contractor's Work Done Report Number with date.
- d) Contractor's Test Pilot's Acceptance Report Number with date.
- e) Customer's Test Pilot's Acceptance Report Number with date.
- f) Signal Out request from Main contractor vide ref. Number with date.

II. Airframe Hours :

III. Engine Number with completed Hours :

IV. Relevant technical notes : - As applicable -

V. Permissions /Authorizations : (From Service HQrs)

VI. Operational Limitations : (Refer : RMTC/MTC/RSD/OEM)

VII. Concessions :

- a) By Service HQ : _____ Nos. (Details as per work done report referred above)
- b) By Regulatory Authority : _____ Nos. (Details as per work done report referred above)

2. Necessary Unit allocation and arrangements for collection of the subject Air system by Ferry pilot be made. This certificate is valid unless revoked by DGAQA.

Regional Director, AQA

Distributions:

1. HQ DGAQA, New Delhi (KA : Director Aircraft)	2. ADG (Zonal Office), DGAQA.
3. RD, RCMA	4. CO, AFLE / NLC / AALC (as applicable)
5. GM, Main Contractor – This is valid subject to satisfactory reservation / Storage / Servicing as per approved documents till arrival of ferry team.	
6. Head of Quality, Main Contractor	7. AO, DAD, MoD



FORM - 25A

APPLICATION FOR CERTIFICATE OF AIRWORTHINESS (COA)/ SIGNALING OUT CERTIFICATE FOR AN AIR SYSTEM

In accordance with IMTAR-21, Subpart H, 21.H.4

1. Applicant's Reference					
1.1 Your Reference:					
2. Applicant Address and Contact Data					
2.1 Applicant Data					
2.2 Name and Address	DGAQA POA/MOA Ref No. (if previously issued)				
	Organisation Name				
	Street No. and Name				
	City				
	State		Post Code		
	Country				
2.3 Contact Person	Title and Full Name				
	Position Title				
	Phone				
	Email				
3. Aircraft / UAS / ALM/Engine					
3.1 Registration Mark:	3.2 Manufacturer	3.3 Type and Model	3.4 Serial No.	3.5 Hours / Cycles	
				Since New	Since Overhaul
Aircraft					
Engine					
UAS					
ALM					



FORM - 25A

APPLICATION FOR CERTIFICATE OF AIRWORTHINESS (COA)/ SIGNALING OUT CERTIFICATE FOR AN AIR SYSTEM

4.4 Mass and Balance for Air System:

- Report No.:
- Loading Schedule:

4.5 Conformity documentation (provide all applicable – follow the note in the guidance section)

- Statement of Conformity for Air system after Production:
- Acceptance of Production Deviation / Concessions (if applicable):
- Statement of Work carried out for Air system after Maintenance:
- Other:

4.6 Manuals and Instructions for Continuing Airworthiness (ICA)

- Approved Aircraft Flight Manuals and Revision No.:
- Approved Aircraft Maintenance Program and Revision No.:
- Operational Limitations:
- Permission/Authorization from user:
- Other:

5. Applicable Declaration

I hereby declared that:

- All requirements of approved maintenance program and applicable Modification Leaflets / Service Instructions have been complied with.
- The aircraft described above had been inspected and found airworthy in conformance with its approved type data.
- All information provided on this form is true and correct
- I understand and accept that for DGAQA to proceed with this application. I have supplied all supporting documentation to DGAQA.

Signature
Quality Department Head



FORM - 28 CLEARANCE FOR SERVICE USE (CSU) OF AIRBORNE STORES

CLEARANCE FOR SERVICE USE OF AIRBORNE Stores FOR AIR SYSTEM <Name of the Platform>

In accordance with IMTAR-21, Subpart C1, 21.C1.22, 21.C1.23

1. **INTRODUCTION:**

<Introduction of Airborne Stores to be provided>

2. **SERVICE CLEARANCE:**

<Statement of Service clearance for respective Platform shall be specified>

3. **BASIS FOR CLEARANCE:**

<Related basis of documents for clearance to be specified>

4. **LIMITATIONS:**

<Limitations wrt Airborne Stores to be specified if any>

5. **CONDITIONS OF CLEARANCE:**

- 5.1 This clearance is contingent upon the quality control aspects being cleared by DGAQA, Ministry of Defence, New Delhi.
- 5.2 This clearance will be invalid if any design/drawing changes are made resulting in variation in the build standard with respect to the standard of the equipment type tested.
- 5.3 The clearance is valid for service use onAir System only.
- 5.4 Necessary action to be initiated for issue of renewal/amendment of Type Approval at the earliest.

6. **TECHNICAL PARTICULARS OF THE AIRBORNE Stores:**

- i.
- ii.
- iii.

CEMILAC / RCMA



FORM - 29 TYPE APPROVAL

Government of India
Ministry of Defence
Centre for Military Airworthiness and Certification



सत्यमेव जयते

Type Approval Certificate

Type Approval Number.:

This is to state that “ <Airborne Stores Name> “, bearing Part No.:..... designed, developed and manufactured by <Contractor Name> is hereby Type Approved as per the Approved Component Build Standard (ACBS) vide document No.and conforms to Technical Specification No.: and Qualification Test Requirements approved by CEMILAC / RCMA (<Dealing RCMA>). The basis for this Type Approval and the relevant Airworthiness Approval information are described in the ‘Type Approval Data Sheet (TADS)’ at Appendix A.

This approval is valid subject to terms, conditions and renewal cum amendment details mentioned overleaf.

Chief Executive (Airworthiness)
CEMILAC

Ref. No. CEMILAC / / TA -.....
Date : DDMMYYYY
Encl : TADS



FORM - 29 TYPE APPROVAL

Terms and Conditions of Type Approval

1. The Provisional Clearances accorded for this product are hereby superseded consequent to issuance of this Type Approval. The process adopted to manufacture this product is sealed henceforth. The Type Approval number quoted above must be reflected in all applicable documents.
2. This Type Approval is valid for 10 years unless otherwise cancelled or suspended or revoked. The vendor shall request the respective RCMA under intimation to CEMILAC, for subsequent renewal if required with all relevant documents including performance feedback.
3. Any changes to the type approved product shall be effected only with prior concurrence of CEMILAC, Bengaluru – 560 037. The Type Approval is not transferable to any other agency without prior approval from CEMILAC.
4. This approval is contingent upon strict adherence to the quality control aspects of bulk production as stipulated by DGAQA, Ministry of Defence, Government of India.
5. Type Approval shall not constitute authority for fitment and integration on any platform unless called in the Equipment Standard of Preparation (ESOP) / Standard of Equipment (SOE) of the platform or specific clearance for service to that effect.

Record of Provisional Clearances issued by RCMA		
Sl. No.	Reference of Provisional Clearance issued/ renewed with date	Validity
1		
2		

Record of Amendments Approved by CEMILAC		
Sl. No.	Amendment details	Basis and Reference
1		
2		



FORM - 29A

APPLICATION FOR ISSUE OF TYPE APPROVAL (TA) / PROVISIONAL CLEARANCE (PC) / LOA (LETTER OF APPROVAL) / INDIAN MILITARY AVIATION TECHNICAL STANDARD ORDER APPROVAL (IMATSOA)

In accordance with IMTAR-21, Subpart C, 21.C1.22, 21.C1.23, 21.C1.24, 21.C1.25, 21.C2.9, 21.C4.13, 21.C4.14, 21.C5.8, 21.C5.9

Select Applicable PC TA LoA IMATSOA

1. Reference		Date:
2. Applicant's Information		
2.1 Applicant Company Data		
2.1.1 Name and Address (As per Registration with Registrar of Companies, India) Companies Act, 2013	Applicant Number	
	(Company) Name	
	Door/Street / Area	
	Post Office	
	City / State	
	PIN	
2.1.2 Contact Person (Responsible for this application)	Title	<input type="checkbox"/> Mr <input type="checkbox"/> Ms
	Name	
	Last Name	
	Job title	
	Phone/Fax	
	Email (Official)	
2.2 Address for Communication		
2.2.1 Address (Required for communication with regard to this application)	(Company) Name	
	Door/Street / Area	
	Post Office	
	City / State	
	PIN	
2.3 Organisation Approval Details		
2.3.1 DOA Details (if applicable)	DOA Number	
	DOA Validity	
	DOA Scope	
3. Airborne Stores Description		
3.1 Airborne Stores Identification		



FORM - 29A

APPLICATION FOR ISSUE OF TYPE APPROVAL (TA)/PROVISIONAL CLEARANCE (PC) / LOA (LETTER OF APPROVAL)/ INDIAN MILITARY AVIATION TECHNICAL STANDARD ORDER APPROVAL (IMATSOA)

3.1.1	Airborne Stores Type Number / Part Number	
3.1.2	Airborne Stores Nomenclature	
3.2	CEMILAC Project Code	
3.3	Brief about the Project	Not exceeding 100 words. Please add enclosure for additional details
3.4	IMTAR Subpart	<input type="checkbox"/> 21.C1 <input type="checkbox"/> 21.C2 <input type="checkbox"/> 21.C4 <input type="checkbox"/> 21.C5

4. Airborne Stores Requirements Details		
4.1	Staff Requirements	If applicable
4.2	Airworthiness Certification Criteria	
4.3	Airborne Stores Requirement Specification	
4.4	Airworthiness Certification Plan	

5. Airborne Stores Configuration		
5.1	Standard of Preparation	List out all the documents that defines the build standard of airborne Stores. This may include but not limited to MDI, BOM, VDD, Process document.

6. Airborne Stores Type Approval Compliance		
6.1	Limitations List	
6.2	Type Record	As per Form 29C
6.3	TAB Compliance	
6.4	User Performance feed back	
6.5	DoDP	As per Form 23 for IMATSOA



FORM - 29A APPLICATION FOR ISSUE OF TYPE APPROVAL (TA)/PROVISIONAL CLEARANCE (PC) / LOA (LETTER OF APPROVAL)/ INDIAN MILITARY AVIATION TECHNICAL STANDARD ORDER APPROVAL (IMATSOA)

7. Applicant's Declaration

I declare that I am authorized by my Organisation to submit this application to CEMILAC and that all information provided in this application form is correct and complete.

I acknowledge that I have read and understood the IMTAR – 21.

I understand that the submission of the application, by itself, does not entitle PC / TA / LoA / IMATSOA.

Place		
Date	Head of Design	Signature

Important Note: CEMILAC cannot accept applications without signature. Please make sure that the application is signed and official seal stamped.

Note: Only references of the documents to be provided in the respective places. This application shall be accompanied by **Form 29C** along with the necessary documents. This application shall be forwarded to dealing RCMA / CEMILAC for further process.



FORM - 29A
APPLICATION FOR ISSUE OF
TYPE APPROVAL (TA)/PROVISIONAL
CLEARANCE (PC) / LOA (LETTER OF
APPROVAL)/ INDIAN MILITARY AVIATION TECHNICAL
STANDARD ORDER APPROVAL (IMATSOA)

Acknowledgement of Receipt of Application

1. Applicant's Reference	Date:	
2. Address (Required for communication with regard to this application)	(Company) Name	
	Door/Street / Area	
	Post Office	
	City / State	
	PIN	
3. Airborne Stores Title		

The application has been received on _____. The application will be reviewed and status will be informed in due course of time

RCMA/ CEMILAC
For Chief Executive (Airworthiness)



FORM - 29B TYPE APPROVAL DATA SHEET (TADS)

In accordance with IMTAR-21, Subpart C, 21.C1.23, 21.C1.24, 21.C1.25, 21.C1.26

Sl. No.	Description	Details / Document Reference
1	Product Name	
2	Part number ¹	
3	Name & address of Design & Development Agency ²	
4	Name and Address of the Manufacturing agency ³	
5	Brief Product end use application (about 10 words)	
6	Type Approval Basis (TAB)	
7	Technical Specification ⁴	
8	Master Drawing Index (MDI) and Bill of Materials (BOM) ⁵	
9	Standard of Preparation (SOP) /ACBS ⁶	
10	Qualification Test Schedule (QTS) / Qualification Test Plan (QTP) / Qualification Test Procedure (QTP) ⁷	
11	Qualification Test Report (QTR) ⁸	
12	Provisional Clearance & renewals / extensions (PC) ⁹	
13	Any other relevant information	

QTS / QTP Compliance Statement

(as per QTS / QTP Reference No. _____ Issue x, Dated _____)

Sl. No.	QTS / QTP Clause No.	Name of Test	Requirement	Compliance Status / Remarks	Means of Compliance (By testing /Analysis / Simulation/ Similarity Basis / any other means)	Test Report / Supporting Document Reference Number

Note

- Part number shall be unique to the product type approved (as in Provisional Clearance) and shall not be changed even if the product undergoes modifications in due course. In exceptional cases where the form, fit and function of the product is affected due to major modifications arising due to end use requirements, the modified product shall be taken up for supplementary type approval with a new part number. The extent of modification and the incremental qualification required for supplementary TA shall be evolved in consultation with RCMA and adequately documented as supplementary type record.



FORM - 29B TYPE APPROVAL DATA SHEET (TADS)

2. Generally, IPR rests with D&D agency and D&D agency(ies) shall be responsible for any Design changes, Modifications, Defect Investigations, Repair schemes, Lifting studies, etc., that may arise during the life cycle. Any thing contrary to the above shall be explicitly captured in the TOT document duly approved by CEMILAC.
3. Manufacturer can be D&D agency itself or may be a development partner during D&D phase or any other agency that may acquire manufacturing rights based on TOT from the D&D agency. Although multiple agencies may manufacture the type approved item with same part number, the product label should adequately capture the name and address of the manufacturer for traceability.
4. All technical specifications shall be approved and authenticated by RCMA. Partial compliance and Deviations to Technical specifications are generally NOT acceptable. However, in exceptional cases the product deviations to the technical specification shall be adequately captured and included in the type approval data sheet duly concurred by RCMA.
5. The DAL and MDI shall be updated whenever there are issue changes and/ or modifications to the product. The same shall be approved by RCMA and taken up for incorporation in the type record and TA certificate at the time of subsequent TA renewal.
6. The product build standard shall be completely defined in the SOP/ ACBS document incorporating the latest issues of the applicable DAL/ MDI and Modifications that may be approved during the product life cycle. The mod leaflets duly approved by RCMA shall be the authority for incorporating such changes till the amendment cum renewal to the TA is issued.
7. QTS / QTP shall capture the type certification test requirements in totality and shall be approved by RCMA.
8. QTR shall adequately capture the Compliance to QTS requirements and shall be vetted by DGAQA. DGAQA to coordinate all the Test reports carried out as per the QTS. Any deviations to test procedures and results shall be addressed completely and accepted by RCMA before recommending for type approval.
9. The renewal and validity and PC shall comply with relevant CEMILAC directives. The Type Approval issued supercedes all earlier PCs issued to the product. Even if the product undergoes modification that warrant field evaluation feedback, fresh PC shall not be issued.
10. D&D agency shall follow suitable Configuration Control mechanism (Document reference number, Issue/ version numbers, Sections, Page numbers, dates) for easy identification and traceability of all the above documents and their subsequent updates from time to time.



FORM - 29C

TYPE RECORD FOR AIRBORNE STORES

In accordance with IMTAR-21, Subpart C, 21.C1.23, 21.C1.24 21.C1.25, 21.C1.26

Sl. No.	Contents of Type Record	Details, Reference Number & Date	Identification in Type Record (as Appendix-A onwards with Page numbers)
1	Brief description of the product with end use application (Not more than 50 words)		
2	Identification of aeronautical Stores: a Nomenclature b Part Number		
3	High resolution colour photographs of the aeronautical Stores, Three views – Post Card Size (except for materials / consumables)		
4	Approved Component Build Standard (ACBS)/ Standard of Preparation (SoP) Document duly signed by the Designer and RCMA (which shall contain following documents like)***		
	a DAL / MDI (1 set of drawings to be enclosed)		
	b BOM / Index (as applicable)		
	c Process document		
	d Software Version Description Document (VDD)		
	e Any other applicable document that describe the build standard (Eg. Applicable Standards / Specifications for raw materials, paints, FOL items etc)		
5	Request letter for TA by Design and Developing agency to RD, RCMA (IPR holder for the product) In case manufacturing agency is applying for renewal the application shall be countersigned by D&D agency unless ToT document indicates that IPR has been transferred to manufacturing agency.		
6	Technical Specification		
7	Qualification Test Schedule and Test procedure document duly approved by RCMA.		
8	Qualification Test Reports (QTR) duly vetted by DGAQA (Report shall be uniquely identified by Document Number and Date)		
9	Certificate of Design		
10	Type Approval Basis (TAB)		
11	TAB Compliance (TABC)		
12	Type Approval Data Sheet (TADS) (As per Form 29B)		



FORM - 29C TYPE RECORD FOR AIRBORNE STORES

13	ToT document (if applicable). [Scope of ToT shall clearly highlight whether Manufacturing (or) Design & manufacturing. Also clearly mention transfer of IPR if included in scope of ToT]. In case of multiple ToT same shall be indicated .		
14	User Performance feedback, if available (from DGAQA/ QA of DPSU/ User Services) and other trial reports		
15	a Cost of the product per unit in rupees b Quantity produced till date		
16	Provisional Clearance and subsequent extensions, amendments issued		
17	Deviations/ Concessions/ limitations w.r.t approval duly / authenticated by RD, RCMA or GD or Director		
18	Any other Remarks		
19	Recommendations of RD, RCMA for Type Approval with comments and observations, if any		

Signature of Head of Design

(With Office Seal)

Date :

Signature of the Main Contractor (If applicable) (Note 1)

(With Office Seal)

Date :

Recommendations of Regional Director

(SIGNATURE OF RD WITH SEAL)

Note:

1. If the applicant is not under DOAS Scheme, Main contractor signature to be obtained
2. Type record shall contain all the documents listed.
3. Contents of Type Record to be suitably indexed as appendix and flagged for easy identification and traceability
4. A soft copy of the Type Record shall be forwarded along with filled application for RMTc/MTC (Form 29A)

*** DAL / MDI, BOI, Process Document, Software version document, any other document which describe the build standard of the item (identified with Reference & date); shall form part of ACBS/ SoP which shall be identified with suitable reference and date.



FORM -29D APPLICATION FOR RENEWAL OF TYPE APPROVAL

In accordance with IMTAR – 21, Subpart C, 21.C1.28, 21.C1.29

- 1 Type Approval No. and Date of Issue :
- 2 Supplementary Type Approvals, if any :
- 3 Product Nomenclature :
- 4 Part Number :
- 5 Name of the firm with Postal Address :
(If more than one firm is approved for manufacturing, the details of all firms with associated ToT references to be mentioned*1)
- 6 Previous Renewals/ Amendments references :
- 7 Details of Changes/ Modifications since :
last renewal that require amendment to the TA,
if any (Supporting documents to be enclosed)
- 8 Current build standard of the item with :
DAL/ MDI, BoM and SOP/ ACBS references
- 9 Quantity supplied since last renewal with details :
of rejections, if any, and corrective actions
- 10 Performance Feedback Report from :
User/ DGAQA/DPSU (Copy to be enclosed)

(Signature of Head of the Design)

Recommendations of Regional Director with comments & observations if any

(SIGNATURE OF RD WITH SEAL)

Note:

1. Copies of complete ToT document shall be forwarded to CEMILAC as and when the ToT is effected



FORM - 29E APPLICATION FOR AMENDMENT OF TYPE APPROVAL

In accordance with IMTAR – 21, Subpart C, 21.C1.28, 21.C1.29

- 1 Type Approval Number :
- 2 Part Number :
- 3 Nomenclature of the Stores
- 4 Category of Amendment proposed : A / B / C (Refer Note 1)
 - i If category A, Flight trial or User feedback :
 - i) Company Name Change
 - ii) Company Address Change
 - iii) Inclusion of multiple manufacturer
(All applicable documents like TOT, PC,
QTR etc. to be submitted)
**(Relevant documents to be submitted as per applicable CEMILAC Directive for
Category A i) & ii)**
 - ii If category B, list of limitations and justification :
supported with flight trial feedback
(Add and refer the separate sheets as
annexure, if necessary)
 - a)
 - b)
 - c)
 - iii) If category C, list of new limitations and reasons :
- 5) Governing Specification :
- 6) Standard of Preparation or Build Standard :
- 7) Qualification Test Plan / Test record :

The Serial Numbers 4, 5 and 6 above are applicable ONLY if there is change in the issue / version from the issued Type Approval.

(Head of the Design)

(Same authority as the issuer of Certificate of Design)

Recommendations of Regional Director

(SIGNATURE OF RD WITH SEAL)



FORM - 29E

APPLICATION FOR AMENDMENT OF TYPE APPROVAL

Note 1:

Amendment is needed for the following category:

- Category A:** i) Company Name Change
ii) Company Address Change
iii) Inclusion of multiple manufacturer (All applicable documents like TOT, PC, QTR etc. to be submitted)

Inclusion of other platforms in addition to those mentioned in the Type Approval.

Category A: Inclusion of other platforms in addition to those mentioned in the Type Approval.

Category B: Overcoming of limitations stated in the initial approval. This is to be supported with details of Design MODs/ Upgrades/ Revisions taken up and proven adequately through ground runs and flight trials as deemed necessary.

Category C: Additional limitations / conditions that arise during service exploitation. These limitations / conditions might not have been foreseen during the initial approval.

Note 2:

The following DO NOT qualify to be taken up with CEMILAC through Form 29E:

- a Modifications under the purview of LMC
- b Changes to the Type record that do not lead to addition or removal of limitations/ conditions stated in the initial approval and
- c Changes to the Type record that do not alter the Compliance Matrix given in the Appendix 'A' of the initial TA.

The above mentioned aspects have to be ratified by the respective RCMA through LMC, as an interim endorsement to TA till it comes up for renewal. The ratification document issued by the RCMA shall restrict the scope and validity of to the subject purpose under consideration only



FORM - 30 MILITARY TYPE CERTIFICATE

Government of India
Ministry of Defence
Centre for Military Airworthiness and Certification



सत्यमेव जयते

Military Type Certificate

MTC Number _____

This certificate is issued to _____ certifies that the type design for the following product with the operating limitations and conditions therefore as specified in the Type Certificate Data Sheet, meets the requirements of Subpart of the Indian Military Technical Airworthiness Regulations-21.

This certificate, and the Type Certificate Data Sheet which is a part hereof shall remain in affect until surrendered, suspended, revoked or a termination date is otherwise established by Chief Executive (Airworthiness).

Chief Executive (Airworthiness)

Issued under the seal

File Number :

Date :

This certificate has _____ pages.

Enclosure : Details of MTC

Version : 2.0

Date: August 2023



FORM - 30 MILITARY TYPE CERTIFICATE

Enclosure to MTC _____

In accordance with IMTAR-21, Subpart B, 21.B1.20, 21.B2.21, 21.B3.22, 21.B4.20

Details of the TC Holder	
ASDOA Number	
(Company) Name	
Address	
Air System Details	
Air System Type Number / Part Num-ber	
Air System Nomenclature	
CEMILAC Project Code	
IMTAR Sub-part	
Staff Requirements	
Airworthiness Certification Criteria	
Air System Requirement Specification	
Type Certification Basis	
Airworthiness Certification Plan	
Standard of Preparation	
Standard of Equipment	
TCB Compliance	
Limitations List	
Type Certificate Data Sheet	



FORM - 30A

APPLICATION FOR ISSUE OF RMTC/MTC

In accordance with IMTAR-21, Subpart B, 21.B1.19, 21.B1.20, 21.B2.20, 21.B2.21, 21.B3.20, 21.B4.18

Select Applicable RMTC MTC

1. Reference		
1.1 Applicant's Reference		Date:
2. Applicant's Information		
2.1 Applicant Company Data		
2.1.1 Name and Address (As per Registration with Registrar of Companies, India) Companies Act, 2013	Applicant Number	
	(Company) Name	
	Door/Street / Area	
	Post Office	
	City / State	
	PIN	
2.1.2 Contact Person (Responsible for this application)	Title	<input type="checkbox"/> Mr <input type="checkbox"/> Ms <input type="checkbox"/> Dr
	Name	
	Last Name	
	Job title	
	Phone/Fax	
	Email (Official)	
2.2 Address for Communication		
2.2.1 Address (Required for communication with regard to this application)	(Company) Name	
	Door/Street / Area	
	Post Office	
	City / State	
	PIN	
2.3 Organisation Approval Details		
2.3.1 DOA Details (if applicable)	DOA Number	
	DOA Validity	
	DOA Scope	
3. Air system Description		
3.1 Air system Identification		
3.1.1 Air system Type Number / Part Number		



FORM - 30A

APPLICATION FOR ISSUE OF RMTC/MTC

3.1.2 Air system Nomenclature	
3.2 CEMILAC Project Code	
3.3 Brief about the Project	Not exceeding 100 words. Please add enclosure for additional details
3.4 IMTAR Sub-part	<input type="checkbox"/> 21.B1 <input type="checkbox"/> 21.B2 <input type="checkbox"/> 21.B3 <input type="checkbox"/> 21.B4

4. Air systems Requirements Details	
4.1 Staff Requirements	If applicable
4.2 Airworthiness Certification Criteria	
4.3 Air system Requirement Specification	
4.4 Type Certification Basis	
4.5 Airworthiness Certification Plan	

5. Air systems Configuration	
5.1 Standard of Preparation	
5.2 Standard of Equipment	

6. Air systems Type Certification Compliance	
6.1 TCB Compliance	
6.2 Limitations List	
6.3 Type Certification Data Sheet	As per Form 30B
6.4 Type Record	As per Form 30C



FORM - 30A APPLICATION FOR ISSUE OF RMTC/MTC

7. Applicant's Declaration			
I declare that I am authorized by my Organisation to submit this application to CEMILAC and that all information provided in this application form is correct and complete.			
I acknowledge that I have read and understood the IMTAR – 21.			
I understand that the submission of the application, by itself, does not entitle RMTC / MTC.			
Place			
Date	Authorized Signatory Head of Design	Signature	Office Seal
Important Note: CEMILAC does not accept applications without signature. Please make sure that the application is signed and official seal stamped.			

Note: Only references of the documents to be provided in the respective places and this application shall be accompanied by **Form 30C** along with the necessary documents. This application shall be forwarded to dealing RCMA / CEMILAC for further process.



FORM - 30A

APPLICATION FOR ISSUE OF RMTC/MTC

Acknowledgement of Receipt of Application

1. Applicant's Reference	Date	
2. Address (Required for communication with regard to this application)	(Company) Name	
	Door/Street / Area	
	Post Office	
	City / State	
	PIN	
3. Air System Title		

The application has been received at CEMILAC on _____. The application will be reviewed and status will be informed in due course of time.

RCMA/ CEMILAC
For Chief Executive (Airworthiness)



FORM - 30B TYPE CERTIFICATE DATA SHEET

Type Certificate Data Sheet

Document Number _____, Version _____, Date _____

Air System Type Number / PN _____

Air System Nomenclature _____

ASDO Name _____

ASDO Address _____

Revision History

Version : 2.0

Date: August 2023



FORM - 30B TYPE CERTIFICATE DATA SHEET

Contents

I. GENERAL

1. Type/Model
2. Performance Class
3. Certifying Authority
4. Manufacturer
5. CEMILAC Certification Application Date
6. CEMILAC Type Certification Date

II. CERTIFICATION BASIS

1. Type Certification Basis
2. Special Conditions
3. Exemptions / Deviations
5. Environmental requirements
6. Operational Suitability Data

III. TECHNICAL CHARACTERISTICS AND OPERATIONAL LIMITATIONS

IV. OPERATING AND SERVICE INSTRUCTIONS

1. Air System Flight Manual
2. Maintenance Instructions and Airworthiness Limitations

V. OPERATIONAL SUITABILITY DATA (OSD)

1. Master Minimum Equipment List
2. Flight Crew Data
3. Cabin Crew Data

VI. CERTIFICATE OF CONFORMITY AS PER FORM NO. 52 (By the Quality Head of the Organisation duly endorsed by DGAQA as Applicable)



FORM - 30C

TYPE RECORD FOR AIR SYSTEM

In accordance with IMTAR-21, Subpart B, 21.B1.19, 21.B2.20, 21.B3.20, 21.B4.18

Sl. No.	Contents of Type Record	Details, Reference Number & Date	Identification in Type Record (as Appendix-A onwards with Page numbers)
1	Brief description of the Air System (Not more than 50 words)		
2	Identification of Air System a Nomenclature b Part Number		
3	High resolution colour photographs of the Air System, Three views – Post Card Size (except for materials / consumables)		
4	Standard of Preparation (SoP) Document duly signed by the Designer and RCMA (which shall contain following documents like)		
	a MDI (1 set of drawings to be enclosed) at Air System level.		
	b Standard of Equipment (SOE)/ Equipment Standard of Preparation (ESOP)		
	c Process document		
5	Reference of the application for issue of RMTC/MTC by Design and Developing agency to RD, RCMA.		
6	Air System Requirement Specification (ARS)		
7	Airworthiness Certification Criteria & Airworthiness Certification Plan		
8	Qualification Test Schedule and Test procedure document for all the airborne Stores duly approved by RCMA/ CEMILAC		
9	Qualification Test Reports (QTR) , Ground Test Report, Flight Test Report for all the airborne Stores duly vetted by DGAQA (Report shall be uniquely identified by Document Number and Date)		
10	Certificate of Design (CoD)		
11	Type Certification Basis (TCB)		
12	TCB Compliance (TCBC)		
13	Type Certificate Data Sheet (TCDS) (As per Form 30B)		



FORM - 30C

TYPE RECORD FOR AIR SYSTEM

Sl. No.	Contents of Type Record	Details, Reference Number & Date	Identification in Type Record (as Appendix-A onwards with Page numbers)
14	ToT document (if applicable). [Scope of ToT shall clearly highlight whether Manufacturing (or) Design & manufacturing. Also clearly mention transfer of IPR if included in scope of ToT]. In case of multiple ToT same shall be indicated.		
15	User Performance feedback, if available (from DGAQA/ QA of DPSU/ User Services) and other trial reports		
16	a Cost of the product per unit in rupees b Quantity produced till date		
17	RMTC and subsequent extensions, amendments issued if applicable		
18	Deviations/ Concessions/ limitations w.r.t approval duly / authenticated by RD, RCMA or GD or Director		
19	Any other Remarks		

Signature of Head of Design

Date :

Note:

1. Type record shall contain all the documents listed.
2. Contents of Type Record to be suitably indexed as appendix and flagged for easy identification and traceability
3. A soft copy of the Type Record shall be forwarded along with filled application for RMTC / MTC (Form 30A)

*** DAL / MDI, BOI, Process Document, Software version document, any other document which describe the build standard of the item (identified with Reference & date); shall form part of ACBS / SoP which shall be identified with suitable reference and date.



FORM - 31

DETAILS OF MODIFICATION PROPOSED FOR AIR SYSTEM / AIRBORNE STORES

In accordance with IMTAR -21, Subpart D, 21.D.8, Subpart E, 21.E.5

I. Originator _____ Serial No. _____
 Mod No. _____ Class _____ Date _____
 Mod proposed for embodiment at _____
 Title _____

II.
 1 Reason for introducing Mod _____
 2 Trial Installation Required Yes / No
 3 Flight Trials Required Yes / No
 4 Effect or Relationship with any other Mod, STI or SI _____
 5 Sl. No. of Air System /Airborne Stores on which the Mod will be first embodied _____
 6 Total No. of Air System /Airborne Stores on which the Mod will be embodied _____
 7 List of new Parts required per Air system /Airborne Stores:

Part Number	
Issue	
Nomenclature	
Qty per Air system /Airborne Stores	

8 Agency responsible to supply kit _____
 9 Existing Part Rendered Redundant:

Part Number	
Issue	
Nomenclature	
Qty per Air system / Airborne Stores	

10 Existing parts which can be recovered after rework

Old Pt. No.		New Pt. No.	
Issue		Issue	
Description		Description	
Qty per Air System / Airborne Stores		Qty per Air System / Airborne Stores	



FORM - 31

DETAILS OF MODIFICATION PROPOSED FOR AIR SYSTEM / AIRBORNE STORES

11 Effect on Interchangeability of Post-Mod & Pre-Mod Spares: _____

12 Effect on Maintenance of Tools, Test Equipment & Ground Equipment: _____

13 Financial effect:

(a) Cost of Modification Kit per Air System /Airborne Stores: Rs. _____

Mod Kit Pt. No.	Issue Nomenclature	Qty. per Air System /Airborne Stores
--------------------	--------------------	---

(b) New Parts Cost No. of Air System /Airborne Stores

(i) Tooling _____ _____

(ii) Materials _____ _____

(iii) Fabrication _____ _____

(iv) Proprietary Items _____ _____

(v) Man-hours for embodiment _____ _____

(c) Rework

(i) Tooling Rs _____.

(ii) Parts Rs _____ (No. of sets.....)

(d) Total cost of introducing Mod for the No. of Air System given in Para (6) above

(b+c) _____ Rs _____

(e) Redundancy

(i) Tooling Rs _____

(ii) Parts Rs _____

14 Foreign exchange requirement _____

Whether Fresh allotment required : Yes / No

Signature of Head of Design

Signature of Head of Quality



FORM - 31C APPLICATION FOR APPROVAL OF REPAIR SCHEME

In accordance with IMTAR-21, Subpart M, 21.M.3, M, 21.M.4

Reference

Applicant's Reference

Date:

1. Operator :
2. Aircraft Type :
3. Aircraft Registration / Tail No. :
4. Manufacturer of Aircraft :
5. Agency Carrying out Repair :
6. Repair Reference No. :
7. Repair Classification along with justification thereof : Minor /Major
(to be carried out as per provisions of 21.M.2)
8. Brief Description of Repair :
9. Original Drawings Affected : Yes / No
10. New Drawings Introduced : Yes / No
11. Any of the following is Affected
 - a. Operating Limitations : Yes / No
(Safety / Strength / Life / Configurations)
 - b. Operating Procedures : Yes / No
(Performance / Functioning)
 - c. Maintenance procedures : Yes / No
 - d. Interchangeability : Yes / No
12. List of Affected Manuals :
13. Brief on Affected Manuals :



FORM - 31C

APPLICATION FOR APPROVAL OF REPAIR SCHEME

14. Requirement for S I/ STI : Yes / No
15. Brief on SI / STI

Signatory (Design) (with Remarks)	
Signatory (Methods) (with Remarks)	
Authorization from Chief of Design	
Approval: (By RCMA / CEMILAC For Repairs classified as Major or if any of 11(a)(b)(d) is Yes) (By RCMA / CEMILAC / DO if authorized through privileges, For Repairs classified as Minor or if 11(a)(b)(d) is No)	



FORM - 32 ALTERATION / AMENDMENT FOR AIR SYSTEM / AIRBORNE STORES

In accordance with IMTAR-21, Subpart D, 21.D.4 Subpart E, 21.E.4

AMENDMENT / ALTERATION / DRAWING CHANGE FORM

	Name & Signature			Date		ALT / AMD No.		LRU / AIRFRAME	
PREPARED BY						REASON FOR CHANGE		PROJECT	
CHECKED BY								REF. DRG. / DAL NO.	
INTERNAL APPROVAL BY									
LIAISON BY						DRAWING / DAL NAME:		PARTS AFFECTED	
COORDINATED BY RDAQA									
APPROVED BY RCMA									
RELEASED BY *									
DISPOSITION OF FABRICATED PARTS	NOT AFFECTED	USE **	REWORK **	SCRAP **	NO STOCK	EFFECTIVE ON PART NO.		AMD. CLASS	
BLOCK AFFECTED	√	---	---	---	----	AMD. INCORPORATED IN DRAWING		ISSUE NO.:	
						YES		DATE	
								AMD NO.	

Sl. No.	Old Drawing No.	New Drawing No.	Old MDI No.	New MDI No.	Change Description	Change Notice (CN) No. / Project Slip (PS) No.	Applicability
1.							
2.							
3.							
4.							

Organisation Name:

*Concerned Liaison / Release agency

** Specific applicable cases shall be discussed with concerned field establishment of CEMILAC & DGAQA and production agencies.



FORM - 33

ADVANCE MODIFICATION INFORMATION FOR AIR SYSTEM /AIRBORNE STORES

In accordance with IMTAR-21, Subpart D, 21.D.8, Subpart E , 21.E.5

NAME OF THE DESIGN AGENCY	ADVANCE MODIFICATION INFORMATION	PROJECT	MODIFICATION NO.	CLASS	AMEND. NO.	DATE
1 Title		4 Applicability		5 Requirement		
2 Reason		6 Relations with other MODs, STI, SI, Etc.				
3 History		7 Trial Compliance report details if required				
10 Comments by Originators Remarks Production Engg - Quality Control - Platform RCMA ORDAQA - User Rep-		8 Drawings/P.S				
		NEW	Revised	Not Required		
		9 Other Aspects				
		a New Components Ref. Part No.	e Performance f Interface	j EMI/EMC k Safety		
		b Manf./Supplier	g Materials	l GSE		
		c MTC/RMTC	h Process			
		d MOD status if any	i Testing			
Approval (Originators)	Compiled by	Checked by	Approved by	Clearance Regional Director RCMA		Sheet 1 of 2 Sheets



FORM - 33

ADVANCE MODIFICATION INFORMATION FOR AIR SYSTEM /AIRBORNE STORES

11 Interchangeability affected?	Yes/No	
12 Operation by Aircrew affected?	Yes/No	
13 Operation by Ground crew affected?	Yes/No	
14 Accessibility affected?	Yes/No	
15 Maintainability affected?	Yes/No	
16 Documentation affected?	Yes/No	
17 Spares affected?	Yes/No	
18 Equipment affected?	Yes/No	
19 Retro embodiment man hours (Estimated)		
20 a. Weight change 20 b. Moment change		
21 Dimension Changes	Yes/No	
Approval (Originators)	Compiled by	Checked by
	Approved by	Clearance Regional Director RCMA
		Sheet 2 of 2 Sheets

NOTE: Give full details if answer to Sl. No. 11 to 18 is “Yes”.



FORM - 34

FORMAT OF INDEX OF MODIFICATIONS FOR AIR SYSTEM /AIRBORNE STORES

In accordance with IMTAR – 21, Subpart D, 21.D.9 Subpart E, 21.E.5

Mod No.	Category	Description @	LMC Meeting No. at which approved	Applicability*	S.P.O.E in Prodn. No. of AC/ Eng / Rotable	Whether retro compliance required and if so when? i.e Whether during O/H or at any other point	Remarks

*-Specific Mk No. of Air system /Airborne Stores Engine or Rotable is to be indicated and As many separate columns as needed to cover all marks to be opened. @-Description should be brief.\$-P.O.E stands for Point of Embodiment in production.

Signature of Main contractor Design

Signature of Methods

Signature of Quality

Coordination of CEMILAC

Version : 2.0

Date: August 2023



FORM - 35 MODIFICATION LEAFLET FORMAT FOR AIR SYSTEM /AIRBORNE STORES

In accordance with IMTAR – 21, Subpart D, 21.D.9 Subpart E, 21.E.5

AUTHORITY _____

Number _____
Date _____

(Name & Address of Contractor / Firm)

MODIFICATION LEAFLET

Sheet No. _____
Issue No. _____

Title _____

Class _____
Type _____

- 1 Reasons
 - a Substantiation
 - b Objective
 - c Operation
 - d Repair Scheme
 - e Interchangeability
 - f Compliance
 - g Approval
- 2 Embodiment
 - a Whether retro mod is applicable:
 - b Compliance of retro mod
 - i Immediate
 - ii During MR / CR
 - c Whether the mod is within the capability of compliance
 - i By user unit
 - ii At user unit by Organisation
 - iii At Organisation only



FORM - 35 MODIFICATION LEAFLET FORMAT FOR AIR SYSTEM /AIRBORNE STORES

- d Cost of Embodiment
 - i Mod Kit per Air System /Airborne Stores supplied to User unit
 - ii Embodiment of Mod per Air System /Airborne Stores by Organisation team at User unit
 - iii Embodiment of mod per Air System /Airborne Stores at Organisation
- 3 Approximate Time Required
 - i Supply of Mod Kit
 - ii Embodiment of Mod on Air System
- 4 Documents /Drawing Required
- 5 Parts and Special Tools Required
- 6 Modification of Spares
- 7 Change of Reference Nos. or Assembly No.
- 8 Sequence of Operation
- 9 Special Tests after Embodiment
- 10 Record Action
- 11 Disposal of Redundant Parts
- 12 Effect on Weight and Balance
- 13 Effect on Air System or Equipment Operation, Handling and Maintenance
- 14 Effect on Publications
- 15 Relationship of the mod with other existing modifications

Amendment to be introduced to technical Data Book / Maintenance and Servicing Manual / Parts catalogue and other publications as applicable

Signature
Head of Design

Signature
Head of Methods

Signature
Head of Quality

Approval by CEMILAC



FORM - 36

APPLICATION FOR CONCESSION ON MODIFICATION / SI/ STI/ SB

In accordance with IMTAR – 21, Subpart F 21.F.22, Subpart D 21.D.10, Subpart E 21.E.10

PART A

(To be completed by the Main Contractor / Firm)

Sl. No.

Date:

- 1 Name and Address of the Contractor / Firm :
- 2 Name / Description of the Modification :
- 3 SOP / SOE Ref No. and Date:
- 4 No. of the Modification / Bulletin / Change Notice :
(Delete whichever is not applicable)
- 5 Class of Modification along with reference to LMC Decision. :
- 6 Reasons for Concession
 - i Drawing / Tech. data not available :
 - ii Modified Component / Material / Spares not available :
 - iii Tooling / Machinery not available :
 - iv Any Other :
7. Action taken for overcoming the problem stated in Para (6) above :
8. Period for which Concession is sought :
9. Nos. of Air Systems / Airborne Stores affected by this Concession :
(Mention Serial Nos. and part numbers also wherever applicable).

Signature of Design Rep

Signature of Head of Quality



FORM - 36

APPLICATION FOR CONCESSION ON MODIFICATION / SI/ STI/ SB

PART - B

Remarks of ORDAQA

1 Reference No.

[Signature]
ORDAQA

PART - C

(To be completed by Chairman L.C.C.)

- 1 Decision of LCC :
- 2 Reference No. LCC Meeting :

[Signature]
Chairman LCC

PART - D

(To be completed by concerned Directorate of User service HQ for Class B/2 modifications).

Decision of User service Headquarters:

1 Reference No.

[Signature]
Dated :



FORM - 38A

APPLICATION FOR TRANSFER OF RMTC/MTC

In accordance with IMTAR – 21, Subpart B, 21.B1.25, 21.B2.26, 21.B3.27, 21.B4.25

1. Grantor's Reference	Date:
-------------------------------	--------------

2. MTC / RMTC Details		
2.1 RMTC / MTC Details	MTC Number and Date of Issue	
	Validity of MTC	
	Type Number / Part Number	
	Air System Nomenclature	
	MTC issued under Subpart	<input type="checkbox"/> 21.B1 <input type="checkbox"/> 21.B2 <input type="checkbox"/> 21.B3 <input type="checkbox"/> 21.B4
	Latest TCDS Reference	

3. Grantor's (MTC Holder) Information		
3.1 Applicant Company Data		
Name and Address (As per Registration with Registrar of Companies, India) Companies Act, 2013	Applicant Number	
	(Company) Name	
	Door/Street / Area	
	Post Code	
	City / State	
	PIN	
3.2 Organisation Approval Details		
DOA Details (if applicable)	DOA Number	
	DOA Validity	
	DOA Scope	

4. Receiver's Information		
4.1 Address (Required for communication with regard to this application)	(Company) Name	
	Door/Street / Area	
	Post Code	
	City / State	
	PIN	
4.2 DOA Details (if applicable)	DOA Number	
	DOA Validity	
	DOA Scope	



FORM - 38A APPLICATION FOR TRANSFER OF RMTC/MTC

5. Transfer Details	
5.1 Reasons for Transfer	
5.2 Transfer Agreement	

6. Grantor's Declaration		
I declare that I am authorized by my Organisation to sign this application to CEMILAC and that all information provided in this application form is correct and complete.		
I acknowledge that I have read and understood the IMTAR – 21.		
I understand that the submission of the application, by itself, does not entitle transfer of RMTC / MTC.		
Place :		
Date :	Name	Signature

7. Receiver's Declaration		
I declare that I am authorized by my Organisation to sign this application to CEMILAC and that all information provided in this application form is correct and complete.		
I acknowledge that I have read and understood the IMTAR – 21.		
I understand that the submission of the application, by itself, does not entitle transfer of RMTC / MTC.		
I understand that the transfer entitles the privileges of a MTC holder but also assumes all responsibilities. These responsibilities include the continued airworthiness responsibilities for all aircraft produced under that MTC (inclusive of those aircraft produced by previous MTC holders).		
Place :		
Date :	Name	Signature

Important Note: CEMILAC does not accept applications without signature. Please make sure that the application is signed and official seal stamped.	
This Application should be sent by fax, e-mail or regular mail to:	
The Chief Executive (Airworthiness) Centre for Military Airworthiness & Certification (CEMILAC) Defence R&D Organisation, Ministry of Defence Marathahalli Colony Post, Bengaluru - 560037 Fax: +91 (0)80 25230856 E-mail: ce.cemilac@gov.in	



FORM - 38A APPLICATION FOR TRANSFER OF RMTC/MTC

Acknowledgement of Receipt of Application

1. Applicant's Reference		Date
2. Address (Required for communication with regard to this application)	(Company) Name	
	Door/Street / Area	
	Post Office	
	City / State	
	PIN	
3. Air System Title		

The application has been received on _____. The application will be reviewed and status will be informed in due course of time.

CEMILAC
For Chief Executive (Airworthiness)



FORM - 38B APPLICATION FOR TRANSFER OF PC/TA/ LOA/IMATSOA

4.2 DOA Details (if applicable)	DOA Number	
	DOA Validity	
	DOA Scope	

5. Transfer Details	
5.1 Reasons for Transfer	
5.2 Transfer Agreement	

6. Grantor's Declaration		
<p>I declare that I am authorized by my Organisation to sign this application to CEMILAC and that all information provided in this application form is correct and complete.</p> <p>I acknowledge that I have read and understood the IMTAR – 21.</p> <p>I understand that the submission of the application, by itself, does not entitle transfer of PC / TA / LoA / IMATSOA</p>		
Place :		
Date :	Name	Signature

7. Receiver's Declaration		
<p>I declare that I am authorized by my Organisation to sign this application to CEMILAC and that all information provided in this application form is correct and complete.</p> <p>I acknowledge that I have read and understood the IMTAR – 21.</p> <p>I understand that the submission of the application, by itself, does not entitle transfer of PC / TA / LoA / IMATSOA.</p> <p>I understand that the transfer entitles the privileges of a PC / TA / LoA / IMATSOA holder but also assumes all responsibilities. These responsibilities include the continued airworthiness responsibilities for all Airborne Stores produced under that PC / TA / LoA / IMATSOA.</p>		
Place :		
Date :	Name	Signature

Note: This application shall be forwarded to dealing RCMA / CEMILAC for further process.



FORM - 38B APPLICATION FOR TRANSFER OF PC/TA/ LOA/IMATSOA

Acknowledgement of Receipt of Application

1. Applicant's Reference	Date	
2. Address (Required for communication with regard to this application)	(Company) Name	
	Door / Street / Area	
	Post Office	
	City / State	
	PIN	
3. Airborne Stores Title		

The application has been received on _____. The application will be reviewed and status will be informed in due course of time.

CEMILAC
For Chief Executive (Airworthiness)



FORM - 40 BOUGHT-OUT ITEM CLEARANCE

CLEARANCE OF AIRBORNE STORES FOR

AIR SYSTEM <Name of the Platform>

In accordance with IMTAR-21, Subpart N, 21.N.3

1. INTRODUCTION:

< Introduction of Airborne Stores to be provided>

2. SERVICE CLEARANCE:

<Statement of BoI clearance for respective Platform shall be specified>

3. BASICS FOR CLEARANCE:

<Related basis of documents for clearance to be specified>

4. LIMITATIONS:

<Limitations wrt Airborne Stores to be specified if any>

5. CONDITIONS OF CLEARANCE:

- 5.1 This clearance will be invalid if any design/drawing changes are made resulting in variation in the build standard with respect to the standard of the equipment type tested.
- 5.2 The clearance is valid for service use on Air System only.

6. TECHNICAL PARTICULARS OF THE AIRBORNE Stores:

- i.
- ii.
- iii.

CEMILAC / RCMA



FORM - 40A APPLICATION FOR CLEARANCE OF AIRBORNE STORES IMPORTED FROM FOREIGN COUNTRY

In accordance with IMTAR-21, Subpart N, 21.N.3 & Subpart S, 21.S.2

1. Whether clearance required for development flight trials/series production:
2. Requirements / Technical Specification approved by CEMILAC:
3. Brief Description and Intended usage:
4. Details of the airborne Stores meeting the spec / Req referred at para 2:
 - a. Part No. of the Airborne Stores:
 - b. OEM of the airborne Stores:
 - c. Country of Origin:
 - d. OEM Technical Specification reference (Copy to be enclosed)
5. Details of the OEM:
 - a. Name & address:
 - b. DOA from country of Origin (if available copy to be enclosed):
 - c. Details of airborne Stores delivered:
6. Details of the proposed airborne Stores:
 - a) Whether the airborne Stores is approved /Certified by National Civil/Military Airworthiness Authority:
if yes following to be provided
 - Name of the Airworthiness Authority:
 - Certificate / Approval reference: (Copy to be enclosed)
 - Validity of the approval referred above:
 - Limitations &Conditions of Approval:
 - b) If already installed/in service with other Aircraft / Helicopter / Engines, details thereof:
 - c) Qualification Test Plan & Reports: (To be enclosed)
 - d) Design Declaration Performance by OEM: (To be enclosed)
7. Compliance Report by the applicant to Spec referred at para 2:
8. Details required to be submitted for issue of Development Flight Clearance / Integration Clearance.
 - Compliance Report by the applicant to meet the SOFT/LQT requirements:
 - Compliance Report by the applicant to meet the Software / CEH certification requirements as defined in Sl. No. 2:
 - Lab Integration Test details:
 - Aircraft ground integration test details:
 - Conditions / Limitations for use on the Platform: (To be provided by the applicant)



FORM - 40A APPLICATION FOR CLEARANCE OF AIRBORNE STORES IMPORTED FROM FOREIGN COUNTRY

9. Details required to be submitted for issue for series Production / Procurement / BoI Clearance:

- Compliance Report by the applicant to meet the QT requirements:
- Compliance Report by the applicant to meet the Software / CEH certification requirements as defined in Sl. No. 2
- Flight Test Reports:
- Lifting details of the airborne Stores:
- M.T.B.F & M.T.B.R:
- Documents required for continued airworthiness:
- Documents required for in service maintenance:
- Details of TTGE:

10. Design Declaration:

I declare that I am authorized by my Organisation to submit this form to CEMILAC and that all information provided in this form is based on the technical data provided by the OEM of the airborne Stores.

I acknowledge that I have read and understood the IMTAR – 21.

I understand that the submission of the application does not entitle certification by CEMILAC

Signature
Head D&D

11. Quality Assurance / Inspection Approval details

- a) Is the Company supply the airborne Stores has/have the approval of the Civil / Military authorities of the country of origin.
- b) Name and rank of the release note signatory.
- c) A brief outline of the Quality Assurance Program / Plan prevailing at the works of the supplier.

12. Chief of Quality Declaration:

I have studied the Quality Assurance / Inspection approval details submitted by the OEM of the airborne Stores and found to be satisfactory.

The airborne Stores manufactured by this OEM will meet all the necessary Quality requirements for the subject airborne Stores and the same can be installed on the Air System.

Name
Signature



FORM - 44

DEFECT INVESTIGATION REPORT FORMAT

In accordance with IMTAR – 21, Subpart C, 21.C1.18, 21.C1.19

Part - I: (Reference): Incident /Accident/ Snag / Explosive			
a)	Defect Report (DR) No. :	(as per DR Control form)	b) Date of Occurrence : DD/MM/YYYY
c)	Installation Details :	(Aircraft / Main Equipment Sl. No.)	
Part - II: (Details of Defective Component)			
a)	Trade :	b)	Date Component received :
c)	System/Sub System :	d)	Main Assembly * :
e)	Nomenclature :	f)	MOD Status :
g)	Part No. :	h)	Sl. No. :
i)	Firmware Version :	j)	Software Version :
k)	Date of Installation :	DD/MM/YYYY	l) Date of Removal : DD/MM/YYYY
m)	Manufacturing Agency :	n)	Date, Month & Year of Manufacturing :
o)	Life completed since New :	Flight Hrs Mission Hrs	p) Repair Agency :
q)	Time Between Overhaul (TBO) or Repair :	r)	Life completed since O/H or repair :
s)	Date of last overhaul / Repair and place :	t)	No. of overhaul / Repair Done :
u)	Has there been a similar defect in any of the Airborne Stores with same Part No.? if yes, then respective DR reference No. to be given.		Yes / No DR No.:
v)	Date of induction of part at main contractor (to be filled by main contractor)		
Part - III: Brief particulars of defect including hours flown:			
a)	Defect Reported:		



FORM - 44

DEFECT INVESTIGATION REPORT FORMAT

b) Defect Observed:

Part - IV: Investigation: (Details of Examination including previous similar Defects)

a) Root Cause Analysis:

b) Findings / Conclusions:

c) Remedial Measures

i. Corrective Action:

ii. Preventive Action:

d) Attributable Code:					
(i) Lapses on the part of User	:	U	(ii) Failure / ageing / Corrosion / Material Failure	:	F
(iii) Lapses on the part of Repair Agency / Manufacturer	:	R	(iv) Not established	:	N
			(v) Defect confirmed but reason not established	:	N1
			(vi) Defect Not Confirmed	:	N2
(vii) Due to features inherent in the design	:	D	(viii) Other Reasons	:	M
(ix) No Failure Found	:	NFF			

Remarks:	
Date:	Signatory of Design Rep



FORM - 44 DEFECT INVESTIGATION REPORT FORMAT

Part - V: Remarks by Design.	
Date:	Signature
Part - VI: Remarks by Quality Dept.	
Date:	Signature
Part - VII: Remarks by User(Project):(if applicable)	
Date:	Signature
Part - VIII: Remarks by ORDAQA (Quality Aspects)	
Date:	Signature
Part - IX: Remarks by CEMILAC / RCMA (Design Aspects)	
Date:	Signature



FORM - 44

DEFECT INVESTIGATION REPORT

FORMAT

INSTRUCTIONS

Item #	Instructions for filling “Defect Investigation Report ”
Part – I (Reference) Incident / Accident / Snag / Explosive	
a)	Write down Defect Control Number which is issued by Head QC.
b)	Write down date of occurrence of Defect (Incident / Accident / Snag / Explosive)
c)	Write down the appropriate serial number of Air System / Main Equipment Sl. No. where defective Airborne Stores was installed
Part – II Details of Defective Component	
a)	Write description of system trade. i.e. Electrical, Mechanical, Avionics, etc.
b)	Please mention date on which component was received by DI Agency.
c)	Write description of the system or subsystem.
d)	Specify the main assembly which means the location where the Airborne Stores mounted/ installed. i.e Rack ‘D’. *This is not applicable for explosives.
e)	Write down the nomenclature of defective Airborne Stores. The Airborne Stores nomenclature should be as per Program / Project SOP.
f)	If there is any Modification, the MOD number to be specified.
g)	Write Part Number as per SOP and is to be same as engraved on the Airborne Stores.
h)	Write Serial Number as per name plate engraved on the Airborne Stores
i)	Write the firmware version details if applicable. Otherwise write “NA”.
j)	Write the Software version details if applicable. Otherwise write “NA”.
k)	Date of installation of Airborne Stores on Aircraft to be specified. Where ever applicable Page No. & line No. of form - 700 entry for installation activity to be given.
l)	Date of removal of Airborne Stores from the aircraft to be mentioned. Where ever applicable Page No. & line No. of form -700 entry for removal activity to be given.
m)	Enter the manufacturer details, If the item / Airborne Stores is outsourced for manufacturing.
n)	Indicate the date, month and year of manufacture.
o)	Please Select appropriate option for warranty of the defective component / SRU / LRU If answer is Yes, specify the period.
p)	Please Select appropriate option either AMC or repair Contract available for the defective component / SRU / LRU. If answer is Yes, specify the period.
q)	Specify the life completed since installation on Aircraft. i.e. Flight Hours (Aircraft Hours) and Mission Hours.
r)	Enter the repair Agency details.
s)	Time between overhaul or repair to be specified as per manual.
t)	Life completed since overhaul or repair to be identified
u)	The details of date and place of last overhaul to be given.
v)	Number of overhauls or repair completed as on date of occurrence of Defect to be recorded.
w)	In case there has been a similar defect in any of the Airborne Stores with same Part No. then respective DR reference No. is to be given.
Part – III Brief Particulars of Defect	
a)	Details defect/snag/incident/accident to be given as reported in DR.
b)	The observation found during checks and rectification of reported defect at ground / STIR /ATE to be recorded.



FORM - 44

DEFECT INVESTIGATION REPORT

FORMAT

Part – IV Investigation	
a)	The exact root cause for failure/defect to be identified and recorded.
b)	Detailed findings to be brought out.
c)	i. Correction is “Action to eliminate a reported defect”. A correction shall be made in conjunction with a corrective action. A correction can be, for example, repair, rework or regrade.
	ii. Corrective Action is to eliminate the cause (root cause) of a reported defect/snag/incident/ accident or other undesirable situation. Also Corrective action is taken to prevent recurrence. There can be more than one cause for a Defect.
d)	Select appropriate Attributable code of defect.
Part – V Remarks by Design	
a)	Comments/Observations of reported Defect, Investigation findings, Root cause, Correction and corrective action from design point of view to be provided in this column.
Part – VI Remarks by Quality Dept.	
a)	This section used to record the flow down process for implementing the corrective action to avoid recurrence of Defect. Head QC shall forward a copy of the DIR to concerned design team as an intimation for carrying out necessary activities towards completion of flow down process.
Part – VI Remarks by User (respective System Coordinator from project Team)	
a)	Whenever applicable, this section is used to record the remarks and opinion of user Rep (i.e. Rep of Customer Project Team) including confirmation of amplification of the statement given in Part I to IV.
Part – VIII Remarks by ORDAQA (Quality Aspects)	
a)	This section is used to record the remarks and opinion of ORDAQA related to Quality aspects including confirmation of amplification of the statement given in Part I to IV. Decision by rep of ORDAQA to be recorded.
Part – IX Remarks by RCMA/CEMILAC (Design Aspects)	
a)	Comments/Observations of reported Defect, Investigation findings, Root cause, Correction and corrective action related to design aspects must be obtained from CRE. (RD,RCMA / Rep of RCMA / CEMILAC).
NOTE: Electronic signature may be used. In this case, the following text can be added: “signature on file” or “electronic signature available”, or similar statement.	
Additional Instructions	
a)	The QC Control Number shall be issued by Head QC or Rep of QC as per approved format.
b)	The designer shall compile information in part I to IV and coordinate with all stake holders for their Remarks.
c)	All entries in part I must be filled legibly and properly by Design Rep. No. entries to be left blank and ‘N/A’ may be written where not applicable. Incomplete DIR shall not be accepted.
d)	Use of white ink correction is prohibited. Any modification / correction in the form shall be done by circling the erroneous entry and writing the correct details. Respective Officer/Rep is to countersign at the place of modification / correction.
e)	All signatories should legibly write their name, designation and date of signature.
f)	The approved original defect Investigation Report to be placed in ATR / Repair ATR of respective Airborne Stores as annexure by Designer.
g)	The Soft copy of approved DIR to be maintained in QCG for record as well as to be forwarded to all as per distribution List.
h)	Attach separate sheets if necessary



FORM - 45A

SERVICING INSTRUCTIONS

In accordance with IMTAR – 21, Subpart L, 21.L.3

User Service IAF IN IA INCG

1. Reference			
Service Instruction No.		Date:	
Title			

2. ASDO Details		
2.1 Name and Address	Name	
	Door/Street / Area	
	Post Code	
	City / State /PIN	
2.2 Responsible Person (Responsible for this SI)	Title	
	Address	
	Phone/Fax	
	Email (Official)	
3. Applicable Air systems		
3.1 Type Number(s)		
3.2 Nomenclature (s)		
4. Reasons		



FORM - 45A SERVICING INSTRUCTIONS

5. Service Instruction			
5.1	Instruction		
(a)	Effectivity		
(b)	Remedial		
(c)	Description		
(d)	Compliance		
(e)	Approval		
(f)	Man Power		
(g)	Material		
(h)	Special Tooling		
(i)	Weight & Balance		
(j)	Operation & handling		
(k)	Electrical Load		
(l)	Interchangeability		
(m)	Servicing and Ground Support Equipment		
(n)	References		
(o)	Publications		
6. Coordination & Approval			
ASDO - Design	ASDO - QA	ASDO - Airworthiness	CEMILAC

Distributions: TAA, Relevant User Services HQ

Note : User Services Hq to distribute to all the relevant Field Units



FORM - 45A SERVICING INSTRUCTIONS

Compliance Certificate for Service Instruction

Note : On completion of the instruction as per the SI, please complete the certificate and mail to the address below:

Service Instruction No.		Date:	
Title			

Name of the Service : _____ Service Unit _____

Aircraft Tail Number	Date of Compliance	Observation (SAT / UNSAT)	Work Carried out by

Certified that the above mentioned aircraft has been complied according the instruction given in the SI

Date: _____ Name : _____ Designation: _____ Signature: _____

Address for Communication

Title	
ASDO Name	
Address	
Phone/Fax	
Email (Official)	



FORM - 45B

SPECIAL TECHNICAL INSTRUCTIONS (STI)

In accordance with IMTAR – 21, Subpart L, 21.L.3

User Service IAF IN IA INCG

1. Reference			
STI No.		Date:	Issue No.
Title			

2. ASDO Details		
2.1. Name and Address	Name	
	Door / Street / Area	
	Post Code	
	City / State / PIN	
2.2 Responsible Person (Responsible for this STI)	Title	
	Address	
	Phone / Fax	
	Email (Official)	
2.3 Applicable Air systems		
2.4 Type Number (s)		
2.5 Nomenclature (s)		
3. Reasons		
4. Compliance		



FORM - 45B SPECIAL TECHNICAL INSTRUCTIONS (STI)

4. Technical Instruction			
4.1 Checks			
4.2 Rectification Action			
(a) Tools			
(b) Consumables			
(c) Shop Facility			
(d) Weight & CG affected			
(e) Documentation affected			
(f) Spares affected			
5. Coordination & Approval			
ASDO - Design	ASDO - QA	ASDO - Airworthiness	CEMILAC

Distributions: TAA, Relevant User Services HQ

Note : User Services Hq to distribute to all the relevant Field Units



FORM - 45B SPECIAL TECHNICAL INSTRUCTIONS (STI)

Compliance Certificate for Service Instruction

Note : On completion of the instruction as per the STI, please complete the certificate and mail to the address below:

STI No.		Date:	
Title			

Name of the Service : _____ Service Unit _____

Aircraft Tail Number	Date of Compliance	Observation (SAT / UNSAT)	Work Carried out by

Certified that the above mentioned aircraft has been complied according the instruction given in the STI

Date: _____ Name : _____ Designation: _____ Signature: _____

Address for Communication

Title	
ASDO Name	
Address	
Phone / Fax	
Email (Official)	



FORM - 45C

URGENT OPERATING NOTICE (UON)

In accordance with IMTAR - 21, Subpart L, 21.L.3

User Service IAF IN IA ICG

1. Reference			
UON No.		Date:	Issue No.
Title			

2. ASDO Details			
2.1	Name and Address	Name	
		Door/Street / Area	
		Post Code	
		City / State /PIN	
2.2	Responsible Person (Responsible for this UON)	Title	
		Address	
		Phone/Fax	
		Email (Official)	
2.3 Applicable Air systems			
2.4	Type Number(s)		
2.5	Nomenclature (s)		
3. Reasons			
4. Notes			
Flight Manual Reference			
Condition			
Crew Action			
5. Coordination & Approval			
ASDO - Design	ASDO –Flight Test Agency	ASDO - Airworthiness	CEMILAC

Distributions: TAA, Relevant User Services HQ

Note : User Services Hq to distribute to all the relevant Field Units



FORM - 50 APPLICATION FOR PRODUCTION ORGANISATION APPROVAL

In accordance with IMTAR – 21, Subpart G2, 21.G2.1

Note: This form to be provided along with Form F1001, Appendix A of AFQMS 2018, Issue – II

**DIRECTORATE GENERAL OF AERONAUTICAL QUALITY
ASSURANCE (DGAQA)
GOVERNMENT OF INDIA, MINISTRY OF DEFENCE
'H' BLOCK, NEW DELHI-110011**

1. Registered name and address of the organisation	
2. Trade name (if different)	
3. Locations for which the approval is applied for	
4. Brief summary of proposed activities at the Block 3 addresses	
a) General	
b) Scope of approval	
c) Nature of privileges	
5. Description of organisation	
6. Links/arrangements with design approval holder(s)/ design Organisation (s) where different from Block 1	
7. Approximate number of staff engaged or intended to be engaged in the activities	
8. Position and name of the Accountable Manager	
9. Details of Management Personnel To be filled and Submitted in Form 4 by the Individual.	
Date	Signature of the Accountable Manager



FORM - 50

APPLICATION FOR PRODUCTION ORGANISATION APPROVAL

Guidelines for Completion of the IMTAR Form - 50

Block 1: Registered name and address of the organisation

The name of the organisation must be entered as stated in the register of the Companies Registration Office. For the initial application a copy of the entry in the register of the Companies Registration Office must be provided to the competent authority.

Block 2: Trade name (if different)

State the trade name by which the organisation is known to the public if different from the information given in Block 1. The use of a logo may be indicated in this Block.

Block 3: Locations for which the approval is applied for

State all locations for which the approval is applied for. Only those locations must be stated that are directly under the control of the legal entity stated in Block 1.

Block 4: Brief summary of proposed activities at the item 3 addresses

This Block must include further details of the activities under the approval for the addresses indicated in Block 3. The Block 'General' must include overall information, while the Block 'Scope of approval' must address the scope of work and products/categories following the principles laid down in IMTAR-21. The Block 'nature of privileges' must indicate the requested privileges as defined in IMTAR 21.

Block 5: Description of organisation

This Block must state a summary of the organisation with reference to the outline of the production organisation exposition, including the organisational structure, functions and responsibilities. The nomination of the responsible managers in accordance with IMTAR 21 must be included as far as possible

Block 6: Links/arrangements with design approval holder(s)/ design organisation(s) where different from 1

The information entered here is essential for the evaluation of eligibility of the application. Therefore special attention must be given concerning the completion of this Block either directly or by reference to supporting documentation in relation to the requirements of IMTAR 21.

Block 7: Approximate number of staff engaged or intended to be engaged in the activities

The information to be entered here must reflect the number of staff, or in case of an initial approval the intended number of staff, for the complete activities to be covered by the approval and therefore must include also any associated administrative staff.

Block 8: Position and name of the Accountable Manager

State the position and name of the Accountable Manager

Block 9: Details of Management Personnel:

State the name and qualification details of the Accountable Manager (AM) and Quality Department Head (QDH) in Form 4.



FORM - 51 APPLICATION FOR SIGNIFICANT CHANGES OR VARIATION OF SCOPE AND TERMS OF PRODUCTION ORGANISATION APPROVAL

In accordance with IMTAR – 21, Subpart G2, 21.G2.5

Note: This Form is made Optional / Not Mandatory

**DIRECTORATE GENERAL OF AERONAUTICAL QUALITY
ASSURANCE (DGAQA)
GOVERNMENT OF INDIA, MINISTRY OF DEFENCE
'H' BLOCK, NEW DELHI-110011**

1. Name and address of the Approval holder	
2. Approval reference number	
3. Locations for which changes in the terms of approval are requested	
4. Brief summary of proposed changes to the activities at the Block 3 addresses	
a) General	
b) Scope of approval	
c) Nature of privileges	
5. Description of organisational changes	
6. Position and name of the Accountable Manager or nominee	
Date	Signature of the Accountable Manager (or nominee)



FORM - 51

APPLICATION FOR SIGNIFICANT CHANGES OR VARIATION OF SCOPE AND TERMS OF PRODUCTION ORGANISATION APPROVAL

Guidelines for Completion of the Form - IMTAR Form - 51

Block 1: Name and address of the Organisation Approval holder

The name must be entered as written on the current approval certificate. Where a change in the name is to be announced state the old name and address here, while using Block 5 for the information about the new name and address. The change of name and/or address must be supported by evidence, e.g. by a copy of the entry in the register of companies.

Block 2: Approval reference number

State the current approval reference number.

Block 3: Locations for which changes in the terms of approval are requested

State the locations for which changes in the terms of approval are requested or state 'not applicable' if no change is to be anticipated here.

Block 4: Brief summary of proposed changes to the activities at the item 3 addresses

This Block should include further details for the variation of the scope of approval for the addresses indicated in Block 3. The Block 'General' must include overall information for the change (including changes e.g. in workforce, facilities etc.), while the Block 'Scope of approval' must address the change in the scope of work and products/categories following the principles laid down in the IMTAR 21. The Block 'nature of privileges' must indicate a change in the privileges as defined in IMTAR 21. State 'not applicable' if no change is anticipated here.

Block 5: Description of organisational changes

This Block must state the changes to the organisation as defined in the current production organisation exposition, including changes the organisational structure, functions and responsibilities. This Block must therefore also be used to indicate a change in the Accountable Manager in accordance with IMTAR 21 or a change in the nomination of the responsible managers in accordance with IMTAR 21. State 'not applicable' if no change is anticipated here.

Block 6: Position and name of the Accountable Manager or nominee

State the position and name of the Accountable Manager here. Where there is a change in the nomination of the Accountable Manager, the information must refer to the nominee for this position. State 'not applicable' if no change is anticipated here.

In case of an application for a change of the accountable manager the IMTAR Form - 51 must be signed by the new nominee for this position. In all other cases the IMTAR Form - 51 must be signed by the Accountable Manager.



FORM - 52

MILITARY AIR SYSTEM STATEMENT OF CONFORMITY BY MAIN CONTRACTOR

In accordance with IMTAR – 21, Subpart F, 21.F.16, 21.F.17

1. Statement Ref No. :		
2. Organisation		
3. Air System Type	4. Military Type Certificate Refs	
5. Air System Registration or Mark	6. Manufacturer's Identification No.	
7. Engine/Propeller Details ⁽¹⁾		
8. Modifications and/or Service Bulletins (or national equivalents) ⁽¹⁾		
9. Modification Leaflets (or national equivalents)		
10. Concessions ⁽²⁾		
11. Exemptions, Waivers or Derogations ⁽³⁾		
12. Remarks		
13. Military Certificate of Airworthiness		
14. SOP ref No. and Date:		
15. Additional Requirements		
16. Statement of Conformity		
<p>I hereby certify that this Air System has been inspected, tested and confirms fully to the Military Type Certificated design and to the items above in boxes 7, 8, 9, 10, 11 and 14. The Air System is hereby recommended for DGAQA clearance/ acceptance. The Air System is in a condition for safe operation. The Air System is found satisfactory during flight tests. Final FDR has been examined and it is certified that all the parameters are meeting the requirement</p>		
17. Signature	18. Name	19. Date (dd/mm/yyyy)
20. Production Organisation Approval Reference		
<p>1. Delete as applicable</p> <p>2. Concession: Authorization to use or release a product that does not conform to specified requirements. A concession is generally limited to the delivery of a product that has nonconforming characteristics within specified limits for an agreed time or quantity of that product.</p> <p>3. Exemptions, Waivers or Derogations: Authorization to depart from the originally specified requirements of a product prior to realization. A deviation permit is generally given for a limited quantity of product or period of time, and for a specific use.</p>		



FORM - 52

MILITARY AIR SYSTEM STATEMENT OF CONFORMITY BY MAIN CONTRACTOR

Instructions for the use of the Air System Statement of Conformity IMTAR Form 52

1. Purpose and scope

- 1.1. Use of the Air System Statement of Conformity issued by a manufacturer producing under IMTAR – 21, Subpart F is described under IMTAR - 21, Subpart F, 21.F.16 and 21.F.17.
- 1.2. The purpose of the Air System Statement of Conformity (IMTAR Form 52) issued under IMTAR - 21, Subpart F is to enable the holder of an appropriate production organisation approval to exercise the privilege to obtain an individual Air System certificate of airworthiness from the DGAQA of the participating Member State of registry.

2. General

- 2.1. The Statement of Conformity must comply with the format attached including block numbers and the location of each block. The size of each block may however be varied to suit the individual application, but not to the extent that would make the Statement of Conformity un-recognizable. If in doubt consult the DGAQA.
- 2.2. The Statement of Conformity must either be pre-printed or computer generated but in either case the printing of lines and characters must be clear and legible. Pre-printed wording is permitted in accordance with the attached model but no other certification statements are permitted.
- 2.3. Completion may be either machine/computer printed or hand-written using block letters to permit easy reading. English, and where relevant one or more of the official language(s) of the issuing participating Member State, are acceptable.
- 2.4. A copy of the Statement and all referenced attachments are to be retained by the approved production organisation.

3. Completion of the Statement of Conformity by the originator

- 3.1. There should be an entry in all blocks to make the document a valid statement.
- 3.2. A Statement of Conformity may not be issued to the DGAQA of the participating Member State of registry unless the design of the Air System and its installed products are approved.
- 3.3. The information required in Blocks 9, 10, 11, 12, and 14 may be by reference to separate identified documents held on file by the production organisation, unless the DGAQA agrees otherwise.
- 3.4. This Statement of Conformity is not intended to include those items of equipment that may be required to be fitted in order to satisfy applicable operational rules. However, some of these individual items may be included in Block 10 or in the approved type design. Operators are therefore reminded of their responsibility to ensure compliance with the applicable operational rules for their own particular operation.



FORM - 52

MILITARY AIR SYSTEM STATEMENT OF CONFORMITY BY MAIN CONTRACTOR

Block 1: Statement Ref No.

A unique serial number should be pre-printed in this block for statement control and traceability purposes. Except that in the case of a computer generated document the number need not be pre-printed where the computer is programmed to produce and print a unique number.

Block 2: Organisation

The full name and location address of the organisation issuing the statement. This Block may be pre-printed. Logos etc. are permitted if the logo can be contained within the Block.

Block 3: Air System Type

The Air System type in full as defined in the Military Type Certificate and its associated data sheet.

Block 4: Military Type Certificate Refs

The Military Type Certificate reference numbers and issue for the subject Air System.

Block 5: Air System Registration or Mark

If the Air System is registered then this mark will be the registration mark. If the Air System is not registered then this will be such a mark that is accepted by the DGAQA of the participating Member State and, if applicable, by the DGAQA of a third country.

Block 6: Manufacturer's Identification Number

The identification number assigned by the manufacturer for control and traceability and product support. This is sometimes referred to as a Manufacturers Serial Number or Constructors Number.

Block 7: Engine / Propeller Details

The full identification of the engine or propeller type(s) in full as defined in the relevant Military Type Certificate and its associated data sheet. Their manufacturer identification number and associated location should also be shown.

Block 8: Modifications and / or Service Bulletins (or national equivalents)

The identification of the approved design changes to the Air System definition.

Block 9: Airworthiness Directives (or national equivalents)

A listing of all applicable Airworthiness Directives (or national equivalent) and a declaration of compliance, together with a description of the method of compliance on the subject individual Air System including products and installed. Parts, appliances and equipment. Any future compliance requirement time should be shown.

Block 10: Concessions

Approved unintentional deviation to the approved type design sometimes referred to as concessions, divergences, or non-conformances.



FORM - 52

MILITARY AIR SYSTEM STATEMENT OF CONFORMITY BY MAIN CONTRACTOR

Block 11: Exemptions, Waivers or Derogations

Only agreed exemptions, waivers or derogations may be included here and should be marked 'Not Used' if there are no exemptions, waivers or derogations.

Block 12: Remarks

Any statement, information, particular data or limitation which may affect the airworthiness of the Air System. If there is no such information or data, state; 'NONE'.

Block 13: Military Certificate of Airworthiness

Enter 'Military Certificate of Airworthiness', or 'Military Restricted Certificate of Airworthiness', or for the Military Certificate of Airworthiness requested.

Block 14: SOP for the air system details to be provided

Block 15: Additional Requirements

Additional requirements such as those notified by an importing country should be noted in this block.

Block 16: Statement of conformity

Validity of the Statement of Conformity is dependent on full completion of all Blocks on the Form. A copy of the flight test report together with any recorded defects and rectification details should be kept on file by the MPOA holder. The report should be signed as satisfactory by the appropriate certifying staff and a flight crew member, e.g. test pilot or flight test engineer. The flight tests performed are those defined under the control of the quality system, as established by EMAR 21.A.139 in particular EMAR 21.A.139(b)(1)(vi), to ensure that the Air System conforms with the applicable design data and is in condition for safe operation. The listing of items provided (or made available) to satisfy the safe operation aspects of this statement should be kept on file by the POA holder.

Block 17: Signed

The Statement of Conformity may be signed by the person authorised to do so by the production approval holder in accordance with IMTAR Subpart G2 & G3. A rubber stamp signature should not be used.

Block 18: Name

The name of the person signing the certificate should be typed or printed in a legible form.

Block 19: Date

The date the Statement of Conformity is signed should be given.

Block 20: Production Organisation Approval

Refer the DGAQA approval reference should be quoted



FORM - 53A

APPLICATION FORM FOR THE DEVIATION DISPOSITION DURING DESIGN AND DEVELOPMENT

In accordance with IMTAR -21, Subpart B, 21. B1.16,21.B2.17, 21.B3.17, 21.B4.15 Subpart C, 21.C1.17, 21.C1.18, 21.C3.1.13, 21.C3.1.14,21.C4.10, 21.C4.11

Main Contractor's Ref. No. _____ Dated _____

Sub-Contractor's Ref. No. _____

NOTE:

1. The granting of this deviation is strictly limited to this specific application and is not to be regarded as a precedent
2. If the application is prepared by a sub-contractor, it must be signed and submitted by the main contractor.

PART – I

1.	Main Contractor (Name & Address)	
2.	Main Contractor Reference Number with date	
3.	Sub-Contractor (Name & address)	
4.	Sub Contract Reference Number with date	
5.	Description of the item and Part Number & Platform	
6.	Stage at which Deviation is observed (SOFT, QT, Flight trial)	
7.	Hardware SOP	
8.	Software Version & Check Sum	
9.	Standard / Specification / Drawing Number / Process documents (which ever applicable)	
10.	a) Affected Quantity b) Batch / Heat / Lot No. / Serial No.	
11.	If the deviation is sought, are any of the following adversely affected? (State YES / NO or N.K (not know) If answer is YES particulars are to be attached. a) Functioning / Performance b) Life of item c) Interchangeability d) Maintenance e) Strength f) Safety Note: If answer is No then full justification to be given (Use separate sheet wherever required)	
12.	Description of Deviation in the item (Continue on separate sheet if necessary)	



FORM - 53A APPLICATION FORM FOR THE DEVIATION DISPOSITION DURING DESIGN AND DEVELOPMENT

13.	Reference number of deviations previously granted. a) of a similar nature b) For the quality / period at items '7' above	
14.	Root Cause for deviation	
15.	Corrective and Preventive action as remedial measures to Prevent recurrence giving full details with PDC etc.	
16.	Remarks by Designer of Main contractor (Agreed / Conditions attached)	

Signature and Designation of Design Rep

Date:

Submitted by: -

Date

Signature of Quality Head

PART - II : TO BE COMPLETED BY THE TAA

1. REMARKS OF DGAQA

(DGAQA may refer to CEMILAC if answer to para 12 is Yes or N.K)

(including confirmation of amplification of the Statements made in Part-I,Section-12)

Date

Signature of DGAQA Rep

Designation/Rank



FORM - 53A

APPLICATION FORM FOR THE DEVIATION DISPOSITION DURING DESIGN AND DEVELOPMENT

2. REMARKS BY CEMILAC
(CEMILAC may refer to NCRB if necessary)

Date Signature of CEMILAC / RCMA Rep Designation / Rank

3. NCRB REFERENCE (If Applicable)
(Main Contractor shall bring out the details of NCRB Here)

Date Signature of Quality Head

4. DISPOSITION BY CEMILAC (If referred to NCRB)
(NCRB decision should be binding on the disposition by CEMILAC)

Date Signature of CEMILAC / RCMA Rep Rank & Designation



FORM - 53B

APPLICATION FORM FOR THE DEVIATION DISPOSITION / PRODUCTION PERMIT DURING LSP / PRODUCTION PHASE (DELIVERABLES) / LICENSED PROJECTS

In accordance with IMTAR - 21, Subpart F, 21.F.21

Main Contractor's Ref. No. _____ Dated _____

Sub-Contractor's Ref. No. _____

NOTE:

1. The granting of this deviation is strictly limited to this specific application and is not to be regarded as a precedent IT IS NOT AN AMENDMENT TO THE CONTRACT AND IS WITHOUT PREJUDICE TO ANY OF THE DEPARTMENT'S RIGHT THEREUNDER.
2. If the application is prepared by a sub-contractor, it must be signed and submitted by the main contractor.

PART - I

1.	Main Contractor (Name & Address)	
2.	Main Contractor Reference Number with date	
3.	Sub-Contractor (Name & address)	
4.	Sub Contract Reference Number with date	
5.	Description of the item and Part Number	
6.	Standard/ Specification / Drawing Number / Process documents (which ever applicable)	
7.	a) Affected Quantity b) Batch / Heat / Lot No. / Serial No.	
8.	If the deviation is sought, are any of the following adversely affected? (State YES, NO or N.K (not know) If answer is YES particulars are to be attached. a) Functioning / Performance b) Life of item c) Interchangeability d) Maintenance e) Strength f) Safety Note: If answer is No then full justification to be given (Use separate sheet wherever required)	
9.	Description of Deviation in the item (Continue on separate sheet if necessary)	
10.	Reference number of deviations previously granted. a) of a similar nature b) For the quality / period at items 7 above	
11.	Root Cause for deviation	



FORM - 53B

APPLICATION FORM FOR THE DEVIATION DISPOSITION / PRODUCTION PERMIT DURING LSP / PRODUCTION PHASE (DELIVERABLES) / LICENSED PROJECTS

12.	Corrective and Preventive action as remedial measures to Prevent recurrence giving full details with PDC etc.	
13.	Design clearance from the Main contractor Agreed / Conditions attached	

Signature and Designation of Methods / Production Planning

Date:

Submitted by: -

Date

Signature of Quality Head

PART - II : TO BE COMPLETED BY THE TAA

1. REMARKS OF DGAQA

(Including confirmation of amplification of the Statements made in Part-I, Section-12)
(DGAQA may refer to CEMILAC)

Date

Signature of DGAQA Rep

Designation/Rank

2. REMARKS BY CEMILAC (If Referred to)

(CEMILAC may refer to NCRB, if necessary)

Date

Signature of CEMILAC / RCMA Rep

Designation/Rank

3. NCRB REFERENCE (If Applicable)

(Main Contractor shall bring out the details of NCRB Here)

Date

Signature of Quality Head

4. DISPOSITION BY DGAQA

(NCRB/CEMILAC decision should be binding on the disposition by DGAQA)

Date

Signature of DGAQA Rep

Designation/Rank



FORM - 55 PRODUCTION ORGANISATION APPROVAL CERTIFICATE

In accordance with IMTAR – 21, Subpart G2, 21.G2.1

Note: In lieu of this form Existing AFQMS Certificate Format may also be used by DGAQA

[DGAQA, Ministry of Defence, Govt of India]

PRODUCTION ORGANISATION APPROVAL CERTIFICATE

Reference: _____

Pursuant to IMTAR-21 regulation and subject to the conditions specified below, the DGAQA hereby certifies

[COMPANY NAME AND ADDRESS]

As a production organisation in compliance with IMTAR - 21, Subpart G, approved to produce products, parts and appliances listed in the attached approval schedule and issue related certificates using the above references.

CONDITIONS :

1. This approval is limited to that specified in the enclosed terms of approval, and
2. This approval requires compliance with the procedures specified in the approved production organisation exposition, and
3. This approval is valid whilst the approved production organisation remains in compliance with IMTAR - 21
4. Subject to compliance with the foregoing conditions, this approval shall remain valid for _____ Years or an unlimited duration unless the approval has previously been surrendered, superseded, suspended or revoked.

Date of original issue :

Date of this revision :

Revision No. :

Signed : _____

For DGAQA :



FORM - 55 PRODUCTION ORGANISATION APPROVAL CERTIFICATE

[DGAQA, Ministry of Defence, Govt of India]	Terms of Approval	Ref:
This document is part of Production Organisation Approval Number _____ :		
Company name:		
Section 1. SCOPE OF WORK:		
Production of	Products/Categories	
For details and limitations refer to the Production Organisation Exposition, Section _____xxx		
Section 2. LOCATIONS:		
Section 3. PRIVILEGES:		
The Production Organisation is entitled to exercise, within its Terms of Approval and in accordance with the procedures of its Production Organisation Exposition, the privileges set forth in IMTAR -21 Subject to the following:		
<i>[keep only applicable text]</i>		
Prior to approval of the design of the product an IMTAR Form 1 or Equivalent may be issued only for conformity purposes.		
A Statement of Conformity may not be issued for a non-approved Air System		
Production may be performed, until compliance with Production regulations is required, in accordance with the Production Organisation Exposition Section _____xxx		
Permits to Fly may be issued in accordance with the Production Organisation Exposition Section _____yyy		
Date of original issue:	Signed:	
Date of this revision:		
Revision No.:	For DGAQA	



FORM - 80 DESIGN ORGANISATION APPROVAL CERTIFICATE

In accordance with IMTAR – 21, Subpart G1, 21.G1.2

[CEMILAC, MINISTRY OF DEFENCE, GOVT. OF INDIA]

DESIGN ORGANISATION APPROVAL CERTIFICATE

DESIGN ORGANISATION APPROVAL NUMBER (DOAN): _____.

Pursuant to IMTAR-21 regulation and subject to the conditions specified below, the CEMILAC hereby certifies

[COMPANY NAME AND ADDRESS]

as a Design organisation in compliance with IMTAR – 21 and Subpart G1, approved to carry out activities towards design, development and airworthiness certification within the scope of approval enumerated below: -

SCOPE OF APPROVAL:

- (a) **Class:**
- (b) **Activities:**

VALIDITY:

Subject to compliance with the conditions stipulated in this certificate, this approval shall remain valid for an unlimited duration.

PRIVILEGES:

The Design Organisation is entitled to operate the privileges enumerated below: -

Sl. No.	Name of the Privilege	Applicable guidelines for operation



FORM - 80 DESIGN ORGANISATION APPROVAL CERTIFICATE

CONDITIONS:

1. This approval is limited to the specified scope.
2. This approval requires compliance with the approved Design Organisation Exposition (DOE) Ref. No. _____.
3. This approval is valid whilst the approved DO remains in compliance with IMTAR – 21, Subpart G1.

LIMITATIONS:

Date of Original Issue:

Date of Preceding Revision:

Date of this revision:

Revision No.:

Signed: _____

Chief Executive (A) CEMILAC:

[CEMILAC, Ministry of Defence, Govt of India]	Schedule of Approval	Ref:
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FORM - 80A

APPLICATION FOR DESIGN ORGANISATION APPROVAL

In accordance with IMTAR – 21, Subpart G1, 21.G1.2

CEMILAC, MINISTRY OF DEFENCE, GOVT OF INDIA MARATHAHALLI COLONY POST, BANGALORE - 560037			
1.	Registered name and address of the Organisation	:	
2.	Registration and GST Details of the Organisation	:	
3.	Name, Designation and Contact Details of Nodal Point of Contact	:	
4.	Locations for which the approval is applied for	:	
5.	Brief Summary of the Organisation	:	
6.	Brief summary of proposed Design activities at the Locations for which approval is applied for <i>(add additional sheets if required)</i>	:	
7.	List of Air Systems/Air Borne Stores approved by CEMILAC in the past <i>(add additional sheets if required)</i>	:	
8.	List of Air Systems/Air Borne Stores under certification by CEMILAC <i>(add additional sheets if required)</i>	:	
9.	Period of active engagement with CEMILAC	:	
10.	Scope of approval	:	
	(a) Class	:	
	(b) Activity	:	
11.	Design Organisation Exposition Number (Copy of DOE to be attached along with the application)	:	Refer Appendix 'A' of this Airworthiness Directive regarding Format for Design Organisation Exposition (DOE)
12.	Details of Quality Management System (QMS) Certification (Attach proof)	:	
13.	National/International Accreditations/ Approvals (Attach proof)	:	
14.	List of Authorised Signatories (Attach Details)	:	Refer Appendix 'B' of this Airworthiness Directive regarding summary sheet of Authorized Signatories



FORM - 82

APPLICATION FOR SIGNIFICANT CHANGES TO DESIGN ORGANISATIONAL APPROVAL

In accordance with IMTAR – 21, Subpart G1, 21.G1.2 & 21.G1.6

1. Name and address of the Approval holder	
2. Approval reference number	
3. Locations for which changes of approval are requested	
4. Brief summary of proposed changes to the activities at the Block 3 addresses	
4.1 General	
4.2 Scope of approval	
4.3 Change in DAS	
4.4 Change in DOE	
4.5 Changes to key Signatories	
4.6 Nature of privileges	
4.7 Description of Procedural changes	
Date	Signature of Head of the Design Organisation



FORM - 100 FLIGHT CLEARANCE CERTIFICATE FOR AIR SYSTEM

In accordance with IMTAR – 21, Subpart P, 21.P.10

Note : Form 100 is a generic format for FCC. Applicable information from Form 100A & Form 100B for Aircraft and Helicopters respectively may also be supplemented to Form 100. FCC form is meant to serve as guidelines and can be adapted to suit the nature of the air system, emphasizing on the necessary information, that affects safety of flying.

FLIGHT CLEARANCE CERTIFICATE FOR DEVELOPMENT TRIALS

Air System type : _____

Engine Type : _____

This is to certify that _____ is cleared for development flight trials within the conditions of release and limitations specified in the following pages of this document.

This certificate will be periodically amended depending on the changes to the standard of preparation of the Air System and flight test data obtained.

This certificate does not constitute any authority to fly unless accompanied by an individual or block Flight Program Clearance Memo (FPCM), as applicable, duly coordinated by CEMILAC & Airworthiness Group of Design Agency and a current certificate of safety for flight form 1090 coordinated by RDAQA (_____).

Head of Design (_____)

Design agency

Date :

CEMILAC

Date :

REF: CEMILAC/FCC/_____

ISSUE: NIL

DATED: _____

Version : 2.0

Date: August 2023



FORM - 100 FLIGHT CLEARANCE CERTIFICATE FOR AIR SYSTEM

The incorporation of each amendment to this document is to be certified by entering below the amendment number, date and signature of the person responsible.

Amendment & Date	Document Number	Signature	Date

CONTENTS

Sl. No.	Chapter	Page No.
1	Introduction	
2	Standard of Preparation of Air System	
3	Basis for Clearance	
4	Operational Limitations	
	4.1 Airfield Operating Limitations 4.2 Taxi, Take-Off and Landing Limitations <ul style="list-style-type: none"> • Tyre, Wheel Brake • Air System Weight and Center of Gravity Limits 4.3 Engine Operating Limitations 4.4 General Flight Limitations 4.5 Other System Limitations	
5	Flight Envelopes	
6	Conditions of Release	



FORM - 100

FLIGHT CLEARANCE CERTIFICATE FOR AIR SYSTEM

1. **INTRODUCTION**

_____ The systems are described briefly in the following paragraphs.

1.1 **OBJECTIVE**

The objective of the flight trials are:

- a. To assess the performance / behavior of the Air System and its systems, compare the same with analysis / Tests carried out.
- b. To validate the aero-data.
- c. To calibrate aero-data, systems and flow direction sensors.
- d. Others

2. **STANDARD OF PREPARATION (SOP) OF AIR SYSTEM**

The SOP of the Air System includes Equipment SOP and Drawing Applicability

2.1 **EQUIPMENT SOP**

The Equipment Standard of Preparation for _____ flight trials is given in document titled _____ Issue: _____ dated: _____, which is kept current by updating whenever any changes occurs

2.2 **DRAWING APPLICABILITY**

The drawing applicability for _____ is given in Ref. No. _____, Issue: Nil, Amd: dated _____ which is kept current by updating at regular intervals.

3. **BASIS FOR CLEARANCE**

The basis for clearance of _____ includes LRU level and System Level clearances and certificate of designs.

3.1 **LRU LEVEL**

The clearances of all LRUs are available in the document _____ Issue: Nil, Amd: Nil dated: _____ which lists out flight clearances of all LRUs by various RCMAs.

3.2 **SYSTEM LEVEL**

Each system clearance includes technical specification, design reports, failure modes and effects analyses, test schedules and associated reports, Air System level test schedules and test reports.

Sl. No.	System	No. of Reports	Certificate of Design Documents Reference
1	Aerodynamics Configuration		
2	Structures & Analysis		
3	Environmental Control System		
4	Life Support System		
5	Hydraulics		
6	Landing Gear & Brake System		
7	Escape System		
8	Flight Control System		
9	Power plant & Fuel System		



FORM - 100

FLIGHT CLEARANCE CERTIFICATE FOR AIR SYSTEM

10	Electrical Power Generation System		
11	Lighting System		
12	Avionics system (Including , Navigation & Communication)		
13	Engine		

4. OPERATIONAL LIMITATIONS

4.1 AIR FIELD OPERATIONS

4.1.1. Taxying Limitations:

- Speed not more than xx knot if canopy is partially open.

4.1.2. Emergency arrester system

- Cleared for emergency entry into arrester barrier system at speeds up to

Ground Speed	xx knot
--------------	---------

4.2 TAXY, TAKE-OFF AND LANDING LIMITATIONS – TYRES, WHEEL BRAKES

4.2.1. The tyres are cleared for rolling at the following ground speeds

Tyre ground speed limits (Knot)	
Main	Nose
xxx	xxx

4.2.2. Brake application speed limit:

Air System Configuration	Mass (kg)	Condition	Speed in TAS (knot)
Clean Configuration	xxx	Normal (xx MJ per Air System)	xx
		Emergency / RTO (xx MJ per Air System)	xx

4.3 TAXY, TAKE-OFF AND LANDING LIMITATIONS - AIR SYSTEM WEIGHT AND CENTRE OF GRAVITY LIMITS

4.3.1. Take-off weight limitations :

- Maximum take-off weight is xxx Kg.



FORM - 100 FLIGHT CLEARANCE CERTIFICATE FOR AIR SYSTEM

4.3.2. Landing weight Vs Sink rate :

Air System Configuration	Max Landing Mass (Kg)	Max Sink rate (m/sec)
Clean Configuration	xxx	xxx

4.3.3. Cross winds during landing and take-off :

Air System is cleared to operate within the following crosswind limitations.

Runway condition		Cross wind Speed (Knots)
Dry	Take off	xx
	Landing	xx
Flooded		Not Cleared

4.3.4. Centre of gravity limits before Take-off:

Allowable centre of gravity range is xx% to xx% MAC for the following pilot weight configuration.

Solo Pilot Configuration:

- Front cockpit: xxx Kg to xxx Kg
- Rear cockpit: Nil

Two pilot Configuration:

- Front cockpit: xxx Kg to xx Kg
- Rear cockpit: xx Kg to xx Kg

4.4 ENGINE OPERATING LIMITATIONS:

The xxxx engine is cleared for operation subjected to following Limitations:

4.4.1. Operating conditions:

Maximum absolute flying altitude, ft	xxx
Maximum air starting altitude, ft	xxx
Maximum indicated airspeed, Mach	xx
Maximum ambient temperature at sea level, °C	xx
Minimum Ambient temperature range for ground starting, °C	xxx
Minimum oil temperature range for air starting, °C	xx



FORM - 100 FLIGHT CLEARANCE CERTIFICATE FOR AIR SYSTEM

4.4.2. Operating Limits on Engine Parameters and Actions:

Sl. No.	Parameters	Normal range	Action if exceed the limit
1	Torque		
2	Rotor speed		
3	<u>EGT</u> During Start		
	Other than Start		
4	Fuel Flow		
5	Oil Pressure		
6	Oil Temperature		
7	Starting Time		

4.4.3. Wind Milling Limit:

Wind Milling Rpm	Operating Limits	Action If Exceeded
28 to 100 %		
18 to 28 %		
10 to 18 %		
5 to 10 %		
0 to 5 %		

4.4.4. Warnings and cautions:

4.4.5. Conditions of release:

This clearance is contingent upon the following:

- This clearance is valid for xxxx hours of flight (inclusive of Ground run, LSTT, HSTT)
- All the maintenance / installation procedures are to be followed as stipulated in the respective OEM manuals.
- This clearance stands invalid if any changes are made from the present Configuration / SOP for the flight tests without the concurrence of CEMILAC (_____).

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FLIGHT CLEARANCE CERTIFICATE FOR AIR SYSTEM

4.4.6. Technical parameters:

Type	
Compressor	
Turbine	
Direction of rotation	
SHP	
Max Torque	
100 % rpm of Ng	
Specific Fuel Consumption, kg / (hr.kgf)	
Prop rpm	
Max allowable Exhaust Temp during starting	
Bleed Extraction	
OIL SYSTEM	
Type	
Oil specification	
Oil tank capacity, quartz	
Oil consumption rate, gallon / hour	
Oil pressure in pressure line, psi	
Inverted flying, sec	
Fuel Specification	

ENGINE FLIGHT ENVELOPE

Mach No. Vs Altitude & CAS

4.5 GENERAL FLIGHT LIMITATIONS

4.5.1. Speed limitations:

Flight speed limitation (Level Flight) (CAS in knot)

Minimum speed (knot) Corresponds to xx° AOA for xx Kg AUW	Clean configuration (Flap Level)	xx
	Take-off & Landing configuration (30 deg Flap)	xx
Max speed / Mach with UC up		xxx
Max speed with UC down and locked		xx

Note: 1'g' stall speeds at Sea level (CAS in knot) for various Air System configuration and AUW are as follows:

Clean configuration : xx Knots

With UC and Takeoff flap : xx Knots

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FLIGHT CLEARANCE CERTIFICATE FOR AIR SYSTEM

Take off speed limitations (CAS in knot):

Recommended take off rotation speed with deg Flap	xx
Unstick speed with max power	xx
Decision speed for RTO	xx

Approach speed limitations (CAS in knot):

Mass (kg)	Approach speed
xxx	xx

4.5.2. Altitude limitations

Maximum pressure altitude with U/C up	xxx ft
Maximum pressure altitude with U/C down	xxxx ft

4.5.3. AOA Limitations

AOA range for Wings-level operations	Max	Min
<ul style="list-style-type: none"> • As indicated on PFD • xx° (Never Exceed) 	xx°	xx°
AOA range for maneuvering operations		
<ul style="list-style-type: none"> • As indicated on PFD 	xx°	xx°

4.5.4. Fuselage scrape attitude:

- With Oleo collapsed and Tyres flat = xxx deg.

4.5.5. Side slip limitations:

Maximum side slip with U/C up	xx deg
Maximum side slip with U/C down	xx deg

4.5.6. Maneuver limitations:

Maneuver limits are permitted within the following:

Inverted flying	xx sec max
360 deg roll (Recommended)	Left and Right



FORM - 100

FLIGHT CLEARANCE CERTIFICATE FOR AIR SYSTEM

4.5.7. Normal Acceleration limitation:

Normal Acceleration limitation for various Air System AUW weight.		xxx Kg
UC up	Minimum permitted	xx g
	Max permitted	xx g
UC down	Minimum permitted	xx g
	Max permitted	xx g

4.5.8. Roll rate limitation:

Maximum Roll rate with U/C up	xxx deg/sec
Maximum Roll rate with U/C down	xxx deg/sec

4.5.9. Roll acceleration limit:

Maximum Roll acceleration with U/C up	xx rad/sec ²
Maximum Roll acceleration with U/C down	xx rad/sec ²

4.5.10. Yaw rate limitation:

Maximum Yaw rate permitted with U/C up	xx rad/sec ²
Maximum Yaw rate permitted with U/C down	xx rad/sec ²

4.5.11. Yaw acceleration limits:

Maximum Yaw acceleration permitted with U/C up	xx rad/ sec ²
Maximum Yaw acceleration permitted with U/C down	xx rad/ sec ²

4.5.12. Pitch acceleration limits

Maximum Pitch acceleration permitted with U/C up	xx deg/sec ²
Maximum Pitch acceleration permitted with U/C down	xx deg/sec ²

4.5.13. Stalling and spinning:

- Air System is not cleared for intentional stalling and spinning.

4.5.14. Weather related limitations:

- The Air System is cleared to fly in fair weather and day light conditions only.
The minimum visibility shall be xx km for demonstration flights

4.6 OTHER SYSTEM LIMITATIONS

4.6.1. AERODYNAMICS

- Angle of Attack limitation for the first block of flights are _____ and Angle of side slip limitations are.

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FORM - 100 FLIGHT CLEARANCE CERTIFICATE FOR AIR SYSTEM

- 4.6.2. STRUCTURE AND ANALYSIS
- 4.6.3. ENVIRONMENTAL CONTROL SYSTEM (ECS)
- 4.6.4. LIFE SUPPORT SYSTEM (LSS)
- 4.6.5. HYDRAULIC
- 4.6.6. LANDING GEAR AND BRAKE SYSTEM
- 4.6.7. ESCAPE SYSTEM
- 4.6.8. FCS
- 4.6.9. FUEL
- 4.6.10. ELECTRICAL AND POWER GENERATION
- 4.6.11. LIGHTING
- 4.6.12. AVIONICS

5. FLIGHT ENVELOPES

- a) The flight envelopes for the development flights are :

1.	Load Factor – Mach No. Envelope	Ref: Fig. 1
2.	Altitude – Mach No. Envelope	Ref: Fig. 2

- b) Operating Envelopes of _____ Air System AUW xxx Kg, _____, Issue: Nil, Amendment: Nil, dated: _____
- c) Aerodynamic operating limitations for _____ Air System AUW xx Kg, vide Technical Memo _____ dated _____.
- d) Computation of Mass and CG data for _____ Air System for xxx kg take-off weight (Computed based on _____ weighing carried on _____) on this weighing vide report No. _____ / _____, Issue: Nil Amendment: Nil dated _____

Fig 1: V-n diagram (wt =xxxx) kg

Fig 2: Flight Envelope for xxxx kg



FORM - 100 FLIGHT CLEARANCE CERTIFICATE FOR AIR SYSTEM

6. CONDITIONS OF RELEASE

- xxxx is cleared for operations in _____ airfields. It is also cleared for outstation trials and demonstration flights (Air Shows) at other airfields, with prior concurrence of CEMILAC.
- The Air System is cleared to fly in fair weather and day light conditions. The minimum visibility shall be xx km for demonstration flights during Air shows.
- The Air System will not carry any Stores.
- Arrestor barrier system shall be made available for all flights.

IMAP-2023 Part II, Chapter 5 & IMTAR 21 Subpart P

Persons authorised for undertaking flight tests:

Only test pilots / test engineers, who have successfully undergone a course in experimental flight testing are authorized to undertake flight testing of experimental, prototype or technology demonstrator Air System under development as a flight crew member. Similarly, persons who have successfully undergone the production test pilots course are authorized to flight-test production Air System of _____, BRDs / NAY or any other main contractor. Non qualified persons are not authorized to be crew members in any developmental flight testing or even as passengers in multi crew Air System during such developmental flight testing. In exceptional cases, however, the CTP / Head of flight testing can authorize in writing specific individuals (non flight test crew) on specific flights.



FORM - 100A

FLIGHT CLEARANCE CERTIFICATE FOR AIRCRAFT

In accordance with IMTAR – 21, Subpart P, 21.P.10

The flying and other LIMITATIONS of _____ are detailed herein:

1. Centre of Gravity Range :

2. Flight Envelope :

For Flight Envelope (Subsonic), Refer Fig-1.

For Design Speed and Mach Number Limits with Altitude, Refer Fig-2. For Values of Load Factor Supersonic case Refer Fig-3.

3. Maximum Limiting Speeds : Clean' Aircraft

- (a) Max. Speed for Clean' aircraft with controls in 'Power'
- (b) Max. Speed for Clean' aircraft with controls in 'Manual'.
- (c) Max. Speed for selecting controls from Manual' to Power' or from Power' to Manual'.
- (d) Max. Speed for extending Air brakes:
 - (i) With controls in Power'
 - (ii) With controls in Manual'.
- (e) Max. speed for operating flaps to Take-off position, including Combat-selection of Flaps.
- (f) Max. speed for operating Flaps to Landing' position.
- (g) Max. speed for raising or lowering undercarriage.
- (h) Max. speed with undercarriage locked Down'.

4. Maximum Limiting Speeds for Carriage & Release of External Stores

The speed Limits should be separately stipulated for flying with controls in Power' and in Manual'.
Carriage Release

5. Minimum Speeds : Clean' Aircraft

Buffet :

Minimum Speed (U/C & Flap : UP) :

Minimum Speed (U/P & Flaps : DOWN)

6. Maximum Normal Acceleration : Clean' Aircraft

Design Value

Flight Test Value

7. Maximum Normal Acceleration with External Stores

The Max. g' limits should be separately stipulated for flying with controls in Power' and Manual'.

External Stores Carried

Max. g' Permissible

8. Roll Maneuvers Limitation : Clean' Aircraft

Pure Roll :

Roll Pull-Out :



FORM - 100A

FLIGHT CLEARANCE CERTIFICATE

FOR AIRCRAFT

9. Roll Maneuvers Limitations - External Stores

(Roll Maneuver limitations should be separately stipulated for flying in □Power' and □Manual')

For Design Limits, See Fig-4 & 5

External Stores carried _____ Limiting □g' / Max. rate of roll in Degree per second

10. Maximum Angle of Side Slip with reference to speed and Configuration

11. Max. Take-off Weights

Note: Recommended Tyre inflation pressure for main wheels against different Take-off weights to be indicated below:

12. Landing

- (a) Max. Landing Weights _____ :
- (b) Landing with Asymmetric Stores _____ :
- (c) Use of Brake Parachute _____ :

13. Single Engine Performance: (Where more than one engine is used)

- (a) Minimum Safety Speed _____ :
- (b) Drift Ceiling _____ :

14. One Engine Failure During Take-off : (Where more than one engine is used) (Min Safety Speed)

15. Engine Relights (Relight envelop speed / mach no. vs altitude)

Maximum speeds for engine relighting in flight, as established by flight tests, are :

Successful Relights are more probable at lower speeds than specified above in each of the altitudes.

16. Pressure Error Correction

17. Use of AVTAG (JP-4) Fuel

18. Gun Firing

19. Ejection Seat

- (a) Ejection Limits _____ :
- (b) Thigh Length and Sitting Height _____ :

20. Engine Limitations

This FCC is issued for Developmental Flight Trials only and it does not constitute any authority to fly unless accompanied by a current Certificate for safety for flight (F-1090) issued by DGAQA.

Head of Design
Contractor's Firm

CEMILAC / RCMA



FORM - 100B

FLIGHT CLEARANCE CERTIFICATE FOR HELICOPTERS

7. Maximum limiting helicopter speeds (without external Stores)

- a) Maximum level speed
 - i) Forward (VH)
 - ii) Sideward
 - iii) Rearward
- b) Never exceed speed
- c) Maximum auto rotational forward speed
- d) Maximum speed with door kept open/removed

8. Maximum operational altitude

- a) Maximum altitude for take-off and landing
- b) Maximum altitude for flying
- c) Zero speed hover out of ground effect ceiling.

9. Maximum normal acceleration - (without external Stores)

- | | |
|----------------------|------------------|
| <u>Instantaneous</u> | <u>Sustained</u> |
| a) Positive | |
| b) Negative | |

10. Maximum angle of side slip at various speeds.

- a) V min P
- b) V cruise
- c) V NE

11. Maximum bank angle

12. Turn on spot

Maximum rate of turn	Altitude/Speed
----------------------	----------------

13. Maximum mast moment

14. Controls margin

	d□ (%)	d□ (%)	d□(%)	d□(%)
a) VH	—	—	—	—
b) Vne	—	—	—	—
c) Left sideward Flight	—	—	—	—
d) Right sideward Flight	—	—	—	—
e) Rearward Flight	—	—	—	—
f) Hover	—	—	—	—



FORM - 100B FLIGHT CLEARANCE CERTIFICATE FOR HELICOPTERS

15. Maximum rate of climb

- i) Vertical
- ii) Oblique

16. Landing on inclined surface

- i) Slope
- ii) Landing direction

17. Maximum tyre inflation pressure

18. Maximum oleo pressure

}

In the case of wheeled version

19. Limitations with External Stores and under slung loads

- | | Item Max Speed | Max 'g' | Max Bank Angle | Side Slip |
|-----------------------|----------------|---------|----------------|-----------|
| a) Armament Stores | | | | |
| b) Under slung loads | | | | |
| i) High density loads | | | | |
| ii) Low density loads | | | | |

20. Engine limits (ISA, S/L)

Rating	Power	TGT (□C)	Torque	NG	ANG
—	—	—	—	—	—

21. Single engine performance - (Where more than one engine is used)

- a) Maximum level speed
- b) Minimum level speed
- c) Maximum rate of climb

22. Engine relight envelope

Max Altitude	Speed	OAT
—	—	—

23. Engine manual handling

24. Use of AVTAG (JP-4) and JP-5 Fuel

25. Transmission Limits

<u>Rating</u>	<u>Power</u>	<u>Torque</u>
—	—	—



FORM - 100B FLIGHT CLEARANCE CERTIFICATE FOR HELICOPTERS

26. Gun firing

- a) Calibre :
- b) Burst length :

27. Pressure error correction

28. Minimum airspeed indicator reading

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Head of Design
Contractor's Firm

CEMILAC / Regional Director (Helicopters)



FORM - 101 FLIGHT PROGRAM CLEARANCE MEMO (FPCM)

In accordance with IMTAR – 21, Subpart P, 21.P.10

Proj Ref : _____

Date:

Air System Type & No. : xxxxxx

FLT : xxx

1. Condition of the Air System
 - 1.1 Configuration : xxxxxxxxxxxxxx
 - 1.2 AUW (at start) : xxx lb (xxx Kg)
 - 1.3 C.G. at T/o : xxxx% (LG Dn), xxxx% of MAC LG up
 - 1.4 Fuel Status : Fuselage – xxx Lb; LH Wing – xxx Lb; RH Wing – xxx Lb
Total – xxx Lb.
2. Flying Program Ref. : Reference to the flying program
3. Flight Clearance Certificate : Ref. No.: _____ Issue: _____, Amdt: _____
Dt. _____
4. Air System Status
 - (a) Data Analysis Ref. of Previous sortie (if applicable): _____
 - (b) Work done report Ref : _____ (Annexure-II).
5. Limitations (not affecting safety / flight test planning):
6. Clearance is subject to the Form 1090 to be issued by RDAQA

Coordinated by

CEMILAC

Main Contractor

Copy to:

- | | |
|--------------|------------|
| 1. CEMILAC | 3. RDAQA |
| 2. CTP (F/W) | 4. AGM (Q) |



FORM - 1090 CERTIFICATE OF SAFETY FOR FLIGHT

In accordance with IMTAR – 21, Subpart P, 21.P.10, 21.P.4

Part-I (To be completed by the Main Contractor)

- 1 (a) Type of Air System: (b) Air System tail no.:
- 2 Airworthiness Certification / Flight Clearance Reference:
- 3 SOP reference:
- 4 Purpose of Taxi/Flight Trial: LSTT / HSTT / Development test flight Contractor / Customer / Handling / Ferry
- 5 Flight Details (a) Flight Number: (b) Flight Configuration:
- 6 Last Flight FDR Analysis: Satisfactory / Not Satisfactory
- 7 QC memo & Daily Inspection reference:
- 8 Limitation if any:
- 9 Aerodrome:
- 10 Authority of the Pilot:
- 11 Name of the Pilot: (I) (II)
- 12 I hereby certify that the Air System has been fully inspected, including the engines, engine installations, instruments and is in every way safe for the intended flight and hereby request permission for the flight to proceed herewith.

(DGAQA Approved QC Rep)

Signature with Stamp

Part-II (To be completed by the DGAQA Rep)

- 13 Authorization for flight:
 - a) Permission is hereby granted on DD/MM/YY at ...hrs to proceed with the above flight and valid for one flight only.
 - b) The F-1090 will remain in force, subject to routine flight servicing and daily inspections being carried out in accordance with approved schedules, for the period stated there on or until invalidated under the conditions stated at in QA directive 01/16 (Air System) dated 22 Sep 2016.
 - c) In an exceptional case of non-utilization of the 1090 on the same calendar day, the revalidation of the F-1090 on subsequent calendar day within 24hrs from the time of issue may be accorded by DGAQA approved contractor's QC officer after ensuring complete DI checks as per schedule in consultation with DGAQA. DGAQA approved Contractor's QC officer shall endorse the same in the Part-III of F-1090 certificate.

(DGAQA Rep Signature with date & time)

Name & Designation



FORM - 1090 CERTIFICATE OF SAFETY FOR FLIGHT

Part-III - Revalidation

- 14 **Revalidation:** I hereby certify that complete DI checks have been carried out as per schedule, in consultation with DGAQA and found satisfactory. The results are recorded in DI sheet no. _____ and F-1090 issued in part-II is revalidated.

(DGAQA Approved QC Rep)

Signature & Stamp with date & time

Part - IV

(Authorized Pilot signature with date &time)

Name & Designation

Distribution: (To be done by the contractor)

Original - To the contractor

First Copy – To the pilot

Second Copy (duly signed by Pilot) – To DGAQA office



FORM - 1090 CERTIFICATE OF SAFETY FOR FLIGHT

Instruction for filling the details in Certificate of Safety for Flight (F – 1090)

1. (a) **Type of Air System:** The brief about the type of Air System like LCA (LSP-07), Su-30 MKI - Phase-1, HTT-40 PT-01 etc.
- (b) **Air System Tail No. :** Registration number of Air System likes SB304, TSR-001, KH-2014 etc.
2. **Airworthiness Certification / Flight Clearance Reference:** Military Type Certificate / Release to Service Document (RSD) / Type Approval / Flight Clearance Certificate(FCC) / Flight Program Clearance Memo (FPCM) ref number from the applicable airworthiness authority / RCMA (CEMILAC) wherever is applicable
3. **SOP reference:** Standard of Preparation against which the Air System is manufactured
4. **Purpose of Flight / Taxi Trial:** Which are not applicable shall be strikeout for example if the 1090 is sought for HSTT than other, which are not applicable may be strike out HSTT / ~~Development test flight/ Contractor/Customer/Handling/ Ferry.~~
5. **Flight Details**
 - (a) **Flight number:** Total number of flight done by the Air System till date
 - (b) **Flight Configuration:** The detail of the system checks to be performed during the flight like Engine performance check, FBW maneuvering etc.
6. **QC memo & Daily Inspection reference:** DGAQA memo clearance and Daily Inspection reference be mentioned
7. **Limitation if any:** Any authorized flight restriction, limitation and notification shall be recorded in this column for the information and concurrence of the flight
8. **Aerodrome:** The name of the airfield
9. **Authority of the Pilot:** Authority letter issued by Service HQrs / CTP of main contractor
10. **Name of the Pilot:** (i) Name of the main pilot (ii) Name of the trainee / Co-pilot
11. **Numbering Scheme:** Each F-1090 issued should be assigned a unique number in X / NNN / DDMMYY format. Where X-Projects like A for Su-30 MKI, B for MiG-21 etc, NNN-Running serial number i.e 001 to 999 for Production year followed by date & month of issue. The F-1090 register should be maintained project wise.