|  |
| --- |
| A. APPLICANT’S DETAILS |
| **1. Name** | **2. Address****5. Phone Number****6. E-mail Address** |
| **3. Nationality** |
| **4. Date and place of birth** |
| B. PART-66 AML DETAILS (if applicable) |
| **1. Licence N°** | **1. Date of issue** |
| C. EMPLOYER’S DETAILS (if applicable) |
| **1. Name** | **2. Maintenance Organisation Approval Reference** |
| **3. Address** | **4. Tel** | **5. Fax** |
| D. APPLICATION |
| **APPLICATION FOR: (Tick relevant boxes)****Initial AML [ ]  Amendment of AML [ ]  Renewal of AML [ ]**  |
| **(Sub)categories**  | **A** | **B1** | **B2** | **B2L** | **B3** | **C** | **L (see below)** |
| **Aeroplane Turbine** | **[ ]**  | **[ ]**  |  |  |  |  |  |
| **Aeroplane Piston** | **[ ]**  | **[ ]**  |  |  |  |  |  |
| **Helicopter Turbine** | **[ ]**  | **[ ]**  |  |  |  |  |  |
| **Helicopter Piston** | **[ ]**  | **[ ]**  |  |  |  |  |  |
| **Avionics** |  |  | **[ ]**  |  **[ ]**  | See system ratings below |
| **Piston engine non-.pressurised aeroplanes of MTOM of 2T and below** |  | **[ ]**  |  |  |  |
| **Complex motor-powered aircraft** |  |  |  |  |  | **[ ]**  |  |  |
| **Aircraft other than complex motor-powered aircraft** |  |  | **[ ]**  |  |  |
|  |
| **System ratings for B2L licence:** |
| **1. Autoflight**  |  |  |  | **[ ]**  |  |  |  |
| **2. Instruments** |  |  |  | **[ ]**  |  |  |  |
| **3. Com/nav** |  |  |  | **[ ]**  |  |  |  |
| **4. Surveillance** |  |  |  | **[ ]**  |  |  |  |
| **5. Airframe systems** |  |  |  | **[ ]**  |  |  |  |
|  |  |  |  |  |  |  |  |
| **L- Licence subcategories:**  |
| **L1C: Composite sailplanes**  |  |  |  |  |  |  | **[ ]**  |
| **L1: Sailplanes**  |  |  |  |  |  |  | **[ ]**  |
| **L2C: Composite powered sailplanes and composite ELA1 aeroplanes**  |  |  |  | **[ ]**  |
| **L2: Powered sailplanes and ELA1 aeroplanes**  |  |  |  | **[ ]**  |
| **L3H: Hot-air balloons**  |  |  |  |  |  |  | **[ ]**  |
| **L3G: Gas balloons**  |  |  |  |  |  |  | **[ ]**  |
| **L4H: Hot-air airships**  |  |  |  |  |  |  | **[ ]**  |
| **L4G: ELA2 gas airships**  |  |  |  |  |  |  | **[ ]**  |
| **L5: Gas airship other than ELA2**  |  |  |  | **[ ]**  |
| Limitation removal (if applicable): ………………………………………………………………………………………………………………………………………………………….…………………………………………………………………………………………………………………………………………………………. |
| E. TYPE ENDORSMENTS/RATING ENDORSMENT (if applicable) |
| **Category** | **Type/rating endorsement as per Appendix I to AMC to Part 66** | **Category** | **Type/rating endorsement as per Appendix I to AMC to Part 66** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |
| **I wish to apply for initial / amendment of / renewal of PART-66 AML, as indicated, and confirm that the information contained in this form was correct at the time of application. I herewith confirm that:** **1. I am not holding any PART-66 AML issued by another Member State; 2. I have not applied for any PART-66 AML in another Member State; and 3. I never had a PART-66 AML issued in another Member State which was revoked or suspended in any other Member State.****I also understand that any incorrect information could disqualify me from holding a PART-66 AML.** |
| **Signed:** | **Name:** | **Date:** |  |

|  |
| --- |
| F. CREDITS |
| **I wish to claim the following credits (if applicable):**………………………………………………………………………………………………………………………………………………………….………………………………………………………………………………………………………………………………………………………….**Experience credit for Part-147 training:**………………………………………………………………………………………………………………………………………………………….………………………………………………………………………………………………………………………………………………………….**Examination credit for equivalent exam certificates:**………………………………………………………………………………………………………………………………………………………….………………………………………………………………………………………………………………………………………………………….(Please enclose all relevant certificates) |
| G. RECOMMENDATION (if applicable) |
| **It is hereby certified that the applicant has met the relevant Part-66 maintenance knowledge and experience requirements and it is recommended that the competent authority grants or endorses the Part-66 AML.** |
| **Signed:** | **Name:** |
| **Position:** | **Date:** |
| **Payment of the following taxes must be made to** **BCEE IBAN LU77 0019 3655 1997 3000, Bic: BCEELULL,** **Bénéficiaire: ALSA S.A.****Address: 4, rue Lou Hemmer, L-1748 Luxembourg****as per règlement grand-ducal of 1 August 2018:****………………… Initial:………….. 191 euros****………………… Variation:………...81 Euros****Please mention “26-a)” for an initial issue, or “26-b)” for an amendment or renewal with the payment.****The form 19 must be sent with :** **✈ a copy of all relevant certificates (for initial, amendment);** **✈ a copy of the current original aircraft maintenance licence (for amendment and renewal);** **✈ a proof of residence “Certificat de Résidence” (if residence has changed);** **✈ a copy of an ID card (for initial only);** **✈ a proof of payment;****to Direction de l’Aviation Civile, BP 283, L-2012 Luxembourg** |



**INFORMATION NOTE ON DATA PROTECTION**

**NOTICE D’INFORMATION SUR LA PROTECTION DES DONNEES**

|  |
| --- |
| **Personnel licences** |
| **Licences du personnel** |

|  |  |
| --- | --- |
| Personal data are processed for the purpose of aviation safety by guaranteeing that only persons possessing the required competences obtain a pilot licence, aircraft maintenance licence or cabin crew attestation.  | Les données à caractère personnel sont traitées en vue de la sécurité des activités aériennes en garantissant que seules les personnes possédant les compétences requises obtiennent une licence de pilote, une licence de maintenance d’aéronef ou un certificat de membre d’équipage.  |
| The data subject has the right :* to access to their personal data,
* to rectification or erasure of personal data or restriction of processing,
* to object to processing,

by contacting the data protection officer (dpo@av.etat.lu). Proof of identity has to be included in the request (ex. copy of identity card or passport, licence number, etc.). | Toute personne concernée a le droit : * d’accéder à ses données personnelles,
* de demander la rectification ou l’effacement des données personnelles, ou la limitation du traitement,
* de s’opposer au traitement,

en contactant le délégué à la protection des données (dpo@av.etat.lu). Une preuve de l’identité doit être jointe à la demande (ex. copie de la carte d’identité ou du passeport, numéro de la licence, etc.). |
| Failure to provide the requested data will prevent the issuance, renewal/revalidation or transfer of the licence or attestation. | Le fait de ne pas fournir les données à caractère personnel requises à la DAC fera obstacle à la délivrance, le renouvellement/la revalidation ou le transfert de la licence ou du certificat en question.  |
| **For more detailed information on the protection of your personal data, please consult our website:** [**https://dac.gouvernement.lu/en/data-protection.html**](https://dac.gouvernement.lu/en/data-protection.html) | **Pour des informations plus détaillées sur la protection de vos données personnelles, veuillez consulter notre site web :** [**https://dac.gouvernement.lu/fr/protection-donnees.html**](https://dac.gouvernement.lu/fr/protection-donnees.html) |