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| **Başvuru Türü / *Type of application***  |
| □ | İlk Başvuru *initial application* | □ | İlk Başvurunun Revizyonu *revision of initial application* | □ | Yetki İade Bildirimi*Notification of surrender* | □ | Değişiklik *Change* |

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| **Değişikliklerin Türü / *Type of changes***  |
| □ | Kuruluşun Adı *Organization name* | □ | İletişim Bilgileri *Contact detail(s)* | □ | Yönetici Personel *Nominated persons* | □ | Diğer *Other(s)* |
| □ | Adres(ler)*Address(s)* | □ | Personel Sayısı *Number of staff* | □ | Yetki Tipi *Rating(s)* |  |  |

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| **SHT-145 Bakım Kuruluşu Onay Referansı / *SHT-145 Maintenance organization approval reference***  |
| **TR.145.** |

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| 1. **Başvuru Sahibi Adı / *Applicant Name***
 |
| Başvuranın Kayıtlı Adı *Registered name of applicant* |  |
| Ticari Adı (farklıysa)*Trading name (if different)* |  |

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| 1. **Başvuru Sahibi Posta Adresi / *Applicant Postal Address***
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| 1. **Onay Gerektiren Yerlerin Adresi / *Address of site(s) requiring approval***
 |
| Ticari Faaliyetin Yürütüldüğü Adres *Principal Place of Business address* |  |
| Üs, Motor ve Komponent Bakım Yerleri (Ticari Faaliyet Adresinden Farklıysa) *Base, Engine and Component Maintenance site(s)* *(if different from the Principal Place of Business)* |  |
| Hat Bakım Yerleri *Line maintenance location(s)* |  |

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| 1. **Kalite Müdürü İletişim Bilgisi / *Quality Manager Contact Details***
 |
| Adı Soyadı / *Name*  | Telefon Numarası / *Tel Number*  | Faks Numarası / *Fax Number*  |
|  |  |  |
| Kalite Birimi E-mail / *Quality e-mail* | Kuruluş E-mail / *Organization generic e-mail* |
|  |  |

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| 1. **Bu Başvuruya İlişkin SHT-145 Bakım Kuruluşu Onayı Kapsamı**

***Scope Of SHT-145 Maintenance Organization Approval Relevant To This Application*** |
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| 1. **Öngörülen Sorumlu Müdür İletişim Bilgisi / *Proposed (\*) Accountable Manager Contact Details***
 |
| Adı Soyadı / *Name*  | Telefon Numarası / *Tel Number*  | Faks Numarası / *Fax Number*  |
|  |  |  |
| E-mail adresi / *E-mail address* | Yer / *Place* | Tarih / *Date* |
|  |  |  |

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| **Öngörülen Sorumlu Müdür İmzası / *Signature of the (proposed\*) Accountable Manager*** |
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| **CLASS** | **RATING** | **LIMITATION** | **BASE** | **LINE** |
|  |
| ***HAVA ARACI*** *AIRCRAFT* | **A1****5700 kg’den ağır hava araçları***Aeroplanes/airships above 5700 Kg* | Quote the expected aircraft type to be added and / or deleted. | **Yes/No** | **Yes/No** |
|  |  |  |
|  |  |  |
| **A2****5700 kg ve hafif hava araçları***Aeroplanes/airships 5700 Kg and below* | Quote the expected aircraft type to be added and / or deleted. | **Yes/No** | **Yes/No** |
|  |  |  |
|  |  |  |
| **A3****Helikopterler***Helicopters* | Quote the expected aircraft type to be added and / or deleted. | **Yes/No** | **Yes/No** |
|  |  |  |
|  |  |  |
| **A4****A1,A2,A3 dışındaki hava araçları***Aircraft other than A1, A2 or A3* | Quote aircraft type or group | **Yes/No** | **Yes/No** |
|  |  |  |
|  |
| ***MOTOR****ENGINES* | **B1**Turbine | Quote the expected engine type(s) to be added and / or deleted as defined in the engine TCDS. |
|  |
| **B2**Piston | Quote engine manufacturer or group or type ) to be added and / or deleted as defined by the OEM |
|  |
| **B3**APU | Quote the expected APU type(s) to be added and / or deleted as defined by the OEM |
|  |
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| ***BÜTÜN HALİNDEKİ MOTOR YA DA APU DIŞINDAKİ KOMPONENTLER*** COMPONENTS OTHER THAN COMPLETE ENGINES OR APUs | C1 | Air Cond & Press | □ | [Shall state aircraft type or aircraft manufacturer or component manufacturer or the particular component and/or the maintenance task(s) and/or cross refer to a capability list in the exposition]“C” ratings to be ticked where necessary |
| C2 | Auto Flight | □ |
| C3 | Comms and Nav | □ |
| C4 | Doors - Hatches | □ |
| C5 | Electrical Power & Lights | □ |
| C6 | Equipment | □ |
| C7 | Engine - APU | □ |
| C8 | Flight Controls | □ |
| C9 | Fuel | □ |
| C10 | Helicopter - Rotors | □ |
| C11 | Helicopter - Trans | □ |
| C12 | Hydraulic Power | □ |
| C13 | Indicating/recording system | □ |
| C14 | Landing Gear | □ |
| C15 | Oxygen | □ |
| C16 | Propellers | □ |
| C17 | Pneumatic & Vacuum | □ |
| C18 | Protection ice/rain/fire | □ |
| C19 | Windows | □ |
| C20 | Structural | □ |
| C21 | Water ballast  | □ |  |
| C22 | Propulsion Augmentation | □ |
|  |
| **SPECIALISED****SERVICES** | D1 Tahribatsız Muayene*Non Destructive Testing* | Eddy Current Inspection | □ | *Shall state particular NDT method(s)* |
| Liquid Penetrant Inspection | □ |
| Magnetic Particle Inspection | □ |
| Radiography Inspection | □ |
| Shearography Inspection | □ |
| Thermography Inspection | □ |
| Ultrasonic Inspection | □ |
| Other Method | □ |