



NIGERIA CIVIL AVIATION AUTHORITY
Corporate Headquarters
Nnamdi Azikiwe Int'l Airport, Domestic Wing, Abuja, Nigeria

FORM: AC-AWS061A

**APPLICATION FOR ISSUE / RENEWAL / VARIATION OF REMOTELY
PILOTED AIRCRAFT OPERATOR CERTIFICATE (ROC)**

1. Official Business Name: _____
Address: _____
Telephone(s) _____ Email: _____
2. Description of the applicant's business organization and corporate structure and name and address of those entities and individuals having a major financial interest: _____

3. (a) Base of Operations(Address): _____
(b) Description of facilities: _____
4. (a) Maintenance Base (Address): _____
(b) Description of proposed operation: _____
5. Key Management personnel (Last name, first name, middle name and resume/CV for all these positions):
 - (a) Accountable Officer (if different from above): _____
Experience / Qualifications _____
 - (b) Head of Operations _____
Experience / Qualifications _____
 - (c) Quality & Safety: _____
Experience / Qualifications _____
 - (d) Maintenance Controller: _____
Experience / Qualifications _____

6. State in respect of the following documents, date(s) of submission, approval ref.

No. & Date(s): _____

(i) Maintenance Control Manual (MCM)

Submission date : _____ Approval ref. no. & Date: _____

(i) Operations Manual

Submission date : _____ Approval ref. no. & Date: _____

7. RPAS/UAV Data

Number of RPAS/UAV: _____

Manufactures: _____

MTOW(Kg) _____

Payload: _____

Endurance: _____

Power Source: ☐ Battery ☐ Fuel

Operations: ☐ VLOS ☐ BVLOS ☐ EVLOS

Provide details list of RPAS/UAV with Communication and Navigation installed _____

8. Crew Training: Provide details of Operations training for all positions.

9. Current ROC held (attach a copy):

(i) Certificate No: _____

(ii) Date of Issue: _____

(iii) Expiring Date: _____

(iv) Issuing Authority: _____

10. RPAS/UAV Type for which variation is sought state the number of each type to be added:

11. In respect of each RPAS/UAV type to be included in the ROC, please indicate the following:

i. Maintenance programme: _____

ii. Minimum Equipment List: _____

iii. RPAS/UAV Technical Log: _____

iv. Arrangement for maintenance support: _____

12. Mandatory Occurrence Reporting (State whose responsibility it is): _____

13. Particulars of maintenance personnel including age, nationality, qualification (Ratings and Currency) and Experience (please attach list)
14. Training arrangements for personnel responsible for supervising the maintenance support for RPAS/UAV to be included in the ROC (this should be made before introducing the RPAS into service) – Type of training and number of personnel involved to be stated in respect of the following:
Management: _____
Supervision: _____
Quality Assurance: _____

(Attach further details as necessary)

Arrangement for RPAS/UAV and system familiarization training and related maintenance practices for maintenance personnel (State type of training and number of maintenance personnel involved):
15. Provisions for a periodic refresher course and O.J.T Programme (also state frequency)

Is an airworthiness occurrence control system in place? YES/NO
If yes, state:

- Method of operation: _____

- Procedures for ensuring that organization responsible for manufacture of each RPAS/UAV type receives adequate report of occurrences: _____
16. In respect of each RPAS/UAV type to be included in ROC, please indicate
- (i) Particulars of operations personnel including age, nationality, qualification (ratings and currency on assigned RPAS/UAV), and experience (list to be attached)
- (ii) Training arrangement for personnel responsible for flight operations of RPAS/UAV to be included in the ROC (this should be made before introducing the RPAS/UAV into service) – state type of training and number of personnel involved, including flight crew and operations personnel (list to be attached)
17. Expatriate quota for foreign staff, if applicable (attach pertinent papers):
18. Last audit/inspection of RPAS organization carried out by NCAA:
- i. Location(s) _____
- ii. Date(s) _____
19. Fee paid:

Amount: _____ Receipt No. _____ Date: _____

Name: _____ Signature: _____

Designation: _____ Date: _____

- Note: 1. (i) Application for grant of an ROC must be submitted at least 90 days before the date of intended operation. However, the operations manual must be submitted not less than 60 days before this date.
- (ii) Application for variation of an ROC must be submitted at least 30 days before the date intended operations.
- (iii) Application for the renewal of an ROC must be submitted at least 30 days before the expiry date of the existing certificate.
2. The Authority must be given at least 10 days prior notice of a proposed change of a nominated post holder.
3. The fee to be paid for grant or variation of an ROC is as per the latest revision of the Civil Aviation (fee) Regulations.
4. Annual and utilization fee are also to be paid in respect of an ROC.

20. Proof of financial capability _ (Attachment): _____

21. Security Clearance if applicable: ____ (attachment☺) _____

*** Delete/leave blank if not applicable.**

TO BE COMPLETED BY THE NCAA

(I) Received by (Name & Signature):

(II) Date:

(III) Assigned Certificate No:

(IV) Officer assigned for assessment

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(v) Date forwarded to assigned officers:

(vi) Remarks:

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