

**Form No12130-010**

**Application For Approval Of**

Major Repair/Alteration <input type="checkbox"/>	Aircraft Reweighting <input type="checkbox"/>
Operator Name	AOC No. & Validity
Mailing Address of Company	Telephone # Fax #
A/C Registration Marks & S/N	A/C Make & Model
Engines Type and Manufacturer	Propellers Model and Type
Reasons for A/C Reweighting /Major Repair-Alteration	
For re-weighting: 1. Date of Previous Reweighting : 2. Manufacture Doc. No., Rev. & Date 3. Previous Empty Weight & C.G. : 4. Change of Empty Weight & C.G. % :	
For Major Repair/Alteration 1. Evaluation that it is major 2. Approved airworthiness data by holder of design approval 3. Approval /validation of STC (as applicable) 4. Special conditions	
Additional Information provided and attached	
Yes: <input type="checkbox"/>	No: <input type="checkbox"/>
Name: Title: Signature: _____ Date: _____	
<b>For Official Use Only</b>	
Received By: Signature: _____ Date: _____ Remarks:	