

Inspection Authorization Renewal Information Sheet

ATTENTION: The information requested below is necessary for the renewal of your Inspection Authorization in accordance with FAR 65.91(c)(3) & (4). This form must be included with the application package.

Name: _____ A&P No. _____

Address: _____

Fixed Base of Operation: _____

Telephone: _____

Fax: _____ Email: _____

If your fixed base of operation is your place of residence, provide an explanation of how you may be contacted in person or by telephone during normal working hours. Also provide details of how and what you will use for facilities and equipment in accordance with FAR 65.91(c)(3) & (4).

Please provide evidence of the source of your technical data required for your operation according to FAR 65.91(c)(4). If you purchase the data or it is available from another source, provide a copy of the purchase invoice, cancelled check or other evidence of the purchase. If you are using data from another source, provide a letter from that source authorizing you to use the data for the duration of the renewal period.

Please answer the following questions:

1. Do you possess or have available to you a revision service for the following FARs?
FAR 1, 21, 23, 27, 33, 35, 39, 43, 45, 47, 65, 91. YES NO
2. Do you possess or have available to you a revision service for AIRWORTHINESS DIRECTIVES?
YES NO
3. Do you possess or have available to you a revision service for TYPE CERTIFICATE DATA/SPEC. SHEETS? YES NO

REMARKS:

I CERTIFY THAT THE ABOVE INFORMATION IS PROVIDED BY ME FOR RENEWAL OF MY INSPECTION AUTHORIZATION AND IS TRUE AND CORRECT.

SIGNATURE: _____