

TANZANIA CIVIL AVIATION AUTHORITY

DIRECTORATE OF SAFETY REGULATIONS AIRWORTHINESS/OPERATIONS

Form

Revision: 1

Document No.: TCAA-AC-GEN022

Title: Application for Approval of Lease Agreement

Page 1 of 2

Note:

This form applies to requests for the approval of lease agreements from the Authority; the particulars listed in the form are vital for the acceptance of lease agreements for evaluation.

1. Applicant Details

Name:			Telephone		
Organization:	:		Fax:		
			Email:		
Address					
2. Type of Lea	ase				
☐Wet Lease	☐ Dry Lea	se in Da	mp Lease Interes	change 🗌 Othe	ers
If others Please	e specify				,
3. Aircraft De	tails				
Aircraft	Aircraft	Aircraft state	Aircraft	Seating	Max takeoff
Make and	serial	of registry	Registration	capacity	weight
Model	number	8 3	marks		8
4. Duration of	the lease				
The lease agree effectively	ement starts from	m	to		
5. Aircraft Ov	vnership partic	culars			
Name					
Address and					
Nationality					



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Passengers only	6. Type of operations						
7. Area of Operation Within Tanzania Regional East and Central Africa Africa Continent Global 8. Required Attachments i. Copy of the Lease Agreement or description of lease provisions ii. Certificate of Registration iii. Certificate of Airworthiness and statement from the registered owner that the aircraft fully complies with airworthiness requirements of state of registry iv. Statements from individual parties under lease agreement that they fully understand their respective responsibilities under the applicable regulations v. Copy of lessor's Operating License (if Applicable) vi. Copy of lessor's Air Operator Certificate (AOC) and OPS specs (if Applicable) vii. Copy elssor Approved maintenance program (if Applicable) viii. Copy of Lessor Operation Manual and Maintenance control manual (if Applicable) ix. Lessor's copy of Third-Party Liability Insurance (if Applicable) x. Other (to be specified)	☐ Passengers only ☐ Scheduled ☐ Cargo Only ☐ Non-Schedule/Charter						
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	x. Other (to be specified)						
Signature:	Applicant's representative Name: Date:						