



Form No. FOD.F.325f
Version No. 3
Issue Date: 07/02/2022
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DTO DECLARATION FORM
[in accordance with Regulation (EC) 1178/2011
and
ANNEX III REQUIREMENTS FOR SAILPLANE
FLIGHT CREW LICENSING (PART SFCL)]

DECLARATION (pursuant to Commission Regulation (EU) No. 1178/2011)	
Initial Declaration: <input type="checkbox"/>	
Notification of Changes – ⁽¹⁾ (Please enter DTO reference number): <input type="checkbox"/>	
1	Declared Training Organisation (DTO) Name:
2	Principal Place of Business: Address: Phone Number: Email:
3	Personnel DTO Representative: Name: Address: Phone: Email: DTO Head of Training (HT) Name: Address: Phone: Email: DTO's deputy head(s) of training, if applicable Name: Address: Phone: Email:

⁽¹⁾ In the case of changes, only point 1 and those fields containing changes need to be completed.



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4.	<p>Training Scope:</p> <p>List of all training provided (list of all training programmes used to provide the training (documents to be attached to this declaration) or, in the case referred to in point DTO.GEN.230(d) of Annex VII (Part-DTO) to Regulation (EU) No 1178/2011, as amended, the reference to all approved training manuals used to provide the training.</p> <p>AEROPLANE:</p> <p>LAPL(A) <input type="checkbox"/> PPL(A) <input type="checkbox"/> SEP (A) (Land) <input type="checkbox"/> SEP (A)(Sea) <input type="checkbox"/> TMG(A) <input type="checkbox"/></p> <p>ADDITIONAL RATINGS:</p> <p>Night <input type="checkbox"/> Aerobatics <input type="checkbox"/> Mountain <input type="checkbox"/> Sailplane <input type="checkbox"/> Banner towing <input type="checkbox"/> Sailplane Towing <input type="checkbox"/></p> <p>HELICOPTER:</p> <p>LAPL(H) <input type="checkbox"/> PPL(H) <input type="checkbox"/> Type (H) <input type="checkbox"/></p> <p>SAILPLANE:</p> <p>Sailplane SPL <input type="checkbox"/></p> <p>ADDITIONAL RATINGS:</p> <p>Sailplane Towing <input type="checkbox"/> Sailplane TMG <input type="checkbox"/> Sailplane Aerobatics <input type="checkbox"/> Sailplane TMG Night Rating <input type="checkbox"/></p> <p>Sailplane Cloud Flying <input type="checkbox"/> FI(S) <input type="checkbox"/> FE(S) <input type="checkbox"/></p>
5.	<p>Training aircraft and FSTDs: List of aircraft used for the training:</p> <p>List of qualified FSTDs used for the training (if applicable, include code as indicated on the qualification certificate(s)):</p>
6.	<p>Aerodrome(s) and the operating site(s)</p> <p>Contact details (address, phone, email) of all aerodromes and operating sites used by the DTO to provide training:</p>
7.	<p>Date of intended commencement of training:</p>

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8	<p>Application for approval of examiner standardisation courses and refresher seminars (Sailplanes and Balloons only)</p> <p><input type="checkbox"/> The DTO hereby applies for approval of the above-mentioned training programme(s) for examiner courses for sailplanes or balloons in accordance with points DTO.GEN.110 (b) and DTO.GEN.230 (c) of Annex VIII (Part-DTO) to Regulation (EU) No 1178/2011.</p>
STATEMENTS	
9	<p><input type="checkbox"/> The DTO has developed a safety policy in accordance with Annex VIII (Part-DTO) of Regulation (EU) No. 1178/2011, and in particular with point DTO.GEN.210 (a)(1)(ii) thereof, and will apply that policy during all training activities covered by the declaration.</p> <p><input type="checkbox"/> We confirm that all information contained in this declaration, including its annexes (if applicable), is complete and correct.</p> <p><input type="checkbox"/> Any change in the operation that affects the information disclosed in this declaration will be notified to the Irish Aviation Authority.</p> <p><input type="checkbox"/> The operator confirms that the information disclosed in this declaration is correct.</p> <p><input type="checkbox"/> The DTO complies and will, during all training activities covered by the declaration, continue to comply with essential requirements set out in Annex IV to Regulation (EU) 2018/1139, with the requirements of Annex 1 (Part-FCL) and Annex VIII (Part-DTO) to Commission Regulation (EU) No. 1178/2011, and with the requirements of Annex III (Part-BFCL) to Commission Regulation (EU) 2018/395 and Annex III (Part-SFCL) to Commission Implementing Regulation (EU) 2018/1976.</p>
	<p>Name: _____ and Signature of the representative of the DTO: _____ (in block)</p> <p>Date: _____</p> <p>Name: _____ and Signature of the HT of the DTO: _____ (in block)</p>
ADDITIONAL COMPANY INFORMATION FOR IAA	
Company Registration Office (CRO) No.: (supply copy)	
Company Address:	
Workplace Address (if different to above)	

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Appendix 1

PAYMENT FORM

The fee for the processing of the initial Declaration is €150.00.
 Subsequent changes to the Initial Declaration is €25.00
 (Full details of fees charged by the IAA are published int the Irish Aviation Authority (Fees) Order).
 I am paying by:-

CREDIT CARD DEBIT CARD LASER (please specify)

Please note that we do not accept **AMERICAN EXPRESS OR DINERS CARD**.
 If paying by credit or debit card, please complete the information required below (in block capitals). Note: All credit card details are destroyed upon completion of this transaction.
 Name of Card holder (as stated on the card) _____

Card Number:

Valid from: /____/____ Expiry Date: /____/____

Security Code (last 3 digits on signature strip on reverse of card):

Address of Card holder, if different from applicant _____

Note: On completion, please submit this Application Form to dto@iaa.ie
 As automated reply will be issued confirming receipt only of the application.
 For further queries please contact FOD Administration at fod@iaa.ie

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