

Republic of the Philippines CIVIL AVIATION AUTHORITY OF THE PHILIPPINES (Application for Reservation of Aircraft Registration Numbers)



I. DATE OF APPLICATION (MM/DD/YYYY): Tick the box with an (X) mark on your desired answer If the information required is not applicable, please write "NA" I								
I hereby apply for: □ AIRCRAFT □ REMOTELY PILOTED AIRCRAFT (RPA) □ RESERVATION □ EXTENSION OF RESERVATION □ CANCELLATION OF RESERVATION								
II.								
Name:								
Address (Number, Street, City, State and Zip Code):								
Contact Number:		Email A	Email Address:					
III. INTENDED USE:								
☐ General Aviation ☐ Commercial Air Transport								
(including personal, corporate and Aerial Works	d instructional flights)		olving transport of passengers, cargo or mail remuneration or hire) Commercial RPA					
(Banner Towing, Agricultural Spraying, etc.) (including Film or Video Recording, Research and Development, Mapping, Instructional Flight and others.)								
Aircraft/RPA History Details				Yes	No			
1. Is the Aircraft/RPA owned by an eligible person as defined in Section 4.2.1.2 of PCAR Part 4? (if yes, attach SEC, Proof of Identification)								
2. Is the Aircraft/RPA brand new or used? (if no, kindly indicate previous owner/operator)								
3. Is the Aircraft demilitarized for civilian use? (if yes, kindly provide supporting document)								
4. Was it previously registered in the Philippines? (if yes, provide copy of previous CoR and Deregistration Certificate)								
5. Was the Aircraft considered scrapped or beyond economic repair by this Authority or Authority from other country?								
6. Was the Aircraft involved in an incident or accident? (if yes, attach detailed report at the back of this form)								
IV. AIRCRAFT/RPA DATA (Limited to ten registry markings only)								
REGISTRY MARK/S	MANUFACTURER	MODEL	SERIAL NUMBER/S	TCDS N				
1.								
2.								
3.								
4.								
5.								
6.								
7.								
9.								
10.								
±U•								

Rev. No. 001 / Rev. Date: 08/14/2023



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V.	v. FOR EXTENSION OF RESERVATIONS						
Expiration date of previous reservation:							
(Note: Please attach a copy of the previously approved letter of reservation)							
VI. FOR CANCELLATION OF PREVIOUSLY APPROVED RESERVATION							
Reason for cancellation:							
I hereby declare that the details furnished above are true and correct to the best of my knowledge and belief, and I undertake to inform you of any changes therein, immediately. OWNER/REPRESENTATIVE							
SIGNATURE OVER PRINTED NAME							
VII.	VERIFIED BY:	CONCURRED	BY:				
	ARMD OFFICER	REGISTRATION OFFICER ENGR. RONALDO R. LUMIBAO Department Manager III	CHIEF, EARD				
Airworthiness							
	DATE APPROVED	VALID UNTIL	DISAPPROVED DUE TO:				
(This should be printed at the back of the form)							

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