



## **EXTENSION REQUEST FOR DEFERRED MEL ITEM**

### **A. DETAILS OF AIRCRAFT:**

1. Registration Mark: P4- \_\_\_\_\_
2. Model: \_\_\_\_\_ 3. Serial No.: \_\_\_\_\_
3. Operator: \_\_\_\_\_

### **B. DETAILS OF MEL ITEM:**

1. Description of MEL item: \_\_\_\_\_
2. MEL item number: \_\_\_\_\_ 3. Technical logsheet number: \_\_\_\_\_
4. MEL Category: \_\_\_\_\_ 5. Deferred defect number: \_\_\_\_\_
6. Date/flight hours of discrepancy: \_\_\_\_\_ 7. Due date/flight hours: \_\_\_\_\_

### **C. DETAILS OF REQUESTED EXTENSION:**

1. Period of extension requested: \_\_\_\_\_  Date  Flight hours  Cycles
2. Interrelationship with other deferred MEL items satisfactorily assessed:  Yes  No
3. Reason for extension request: \_\_\_\_\_

### **D. APPLICATION DECLARATION:**

By signing the application I hereby declare, to the best of my knowledge, that all information provided is truthful and correct.

\_\_\_\_\_  
Date (Day/Month/Year)

\_\_\_\_\_  
Name of applicant

\_\_\_\_\_  
*QA Manager signature*  
*(Commercial operation only)*

\_\_\_\_\_  
Position of applicant

\_\_\_\_\_  
Signature of applicant

### **E. DCA APPROVAL:**

Additional conditions/limitations:

\_\_\_\_\_  
Date (day/month/year)

\_\_\_\_\_  
Name of DCA representative

\_\_\_\_\_  
Signature of DCA representative

### **Notes for the Completion of this Application**

- A. This Form is to be completed for all requests of extensions of deferred MEL items. Operators that already have their own standardized form are welcome to keep using these.
- B. A copy of the applicable aircraft technical logsheet shall be attached to this request.
- C. In case of commercial operation the request shall be co-signed by the Quality Manager.