



Republic of the Philippines  
CIVIL AVIATION AUTHORITY OF THE PHILIPPINES

**APPLICATION FOR EXEMPTION**

Part A1 – Application for Exemption

Details of Applicant	
Name of Applicant	
Applicant's Address (Street Address and Mailing Address, if different)	
Telephone Number (Fax Number, if applicable)	
Email Address	

Particulars of Requested Exemption	
References to the specified requirements in the applicable regulations, rules, implementing standards or directive from which exemption are sought	
CAR Reference	Details of Regulatory Requirement



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<b>Other Related References (e.g. ICAO Documents)</b>	<b>Details of Regulatory Requirement</b>
<b>Details of the person, aircraft operations, or type of aircraft or aeronautical product, or material or kind of material, or service or kind of service to be affected by the exemption</b>	
<b>The reason/s why the exemption is/are necessary</b>	
<b>Associated implication if such exemption is not granted</b>	



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Part A2 – Details of Applicant’s Safety Measures

**Details of how the applicant proposes to ensure that an acceptable level of safety will be provided when operating in accordance with the exemption if granted**

**Details of how ALoS will be monitored**

**Review and discuss of any known safety concerns with the requirement.**



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List the details of Safety and Public Interest Factors Considered		To be completed by CAA	
<b>Safety Factors</b>		<b>Accepted by Regulator (Y/N)</b>	
1)			
2)			
3)			
4)			
<b>Public Interest Factors</b>		<b>Accepted by Regulator (Y/N)</b>	
1)			
2)			
3)			
4)			
<b>Is the Applicant aware of any information on relevant accidents or incidents related to similar conditions either due to or requiring exemption?</b>		<b>Y/N</b>	
<b>If yes above provide details of Accident/Incident</b>			
<b>Indicate which other parties may be affected by granting exemption (To be completed by the applicant)</b>			
<b>Airlines</b>		<b>Maintenance Organizations</b>	
<b>Air Crew</b>		<b>Ground Staff</b>	
<b>Air Traffic Controllers</b>		<b>Training Organizations</b>	
<b>Aerodromes</b>		<b>Rescue and Fire Fighting</b>	
<b>Security</b>		<b>General Public</b>	
<b>Other (Specify Below)</b>			



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Part A3 Application

**Processing time required.**

Unless the Authority agrees otherwise, an application for an exemption shall be submitted not less than sixty (60) days in advance of the proposed effective date of the exemption. Where an applicant seeks emergency processing, the application must contain supporting facts and reasons why the application was not filed in a timely manner, and the reasons it is an emergency. An application may be rejected if the Authority finds that the applicant has not justified the failure to apply in a timely manner

Duration of Exemption	
Exemption Start Date and Time (in UTC)	Exemption End Date and Time (in UTC)

Will the applicant seek to operate under the proposed exemption outside of Philippine airspace?	Y/N
If yes indicate whether the exemption would contravene any provision of the standards and recommended practices of the International Civil Aviation Organization (ICAO)	

Safety risk assessment, analysis or aeronautical studies to justify the application done		Alternative means of compliance / mitigations proposed	
YES (ATTACH REPORT)	NO	YES	NO

**DOCUMENTS ATTACHED**

1)	
2)	
3)	

Person Requesting Exemption (Accountable Manager / CEO / Nominated Post Holder as applicable)	
Full Name →	
Email & Phone →	



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**DECLARATION BY THE APPLICANT**

The applicant/holder hereby declares that the information provided in this application is correct and that no relevant information has been withheld.

**Signature over printed name**

**Date:**        /        /



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Part B1 – Inspector Evaluation and recommendation of Exemption Assessment by CAAP-FSIS

<b>Department responsible for Evaluating Exemption</b>	
<b>Inspector Responsible</b>	
<b>Email of Inspector</b>	

Checklist and evaluation of Exemption Package		Y/N	Satisfactory/ Not-satisfactory
<b>1</b>	Has the applicant clearly specified the details of the exemption sought?		
<b>2</b>	Do the details include the reasons why the exemption is sought?		
<b>3</b>	Do the details include the duration of the exemption?		
<b>4</b>	Has the applicant clearly indicated the factors considered in making the request?		
<b>5</b>	Do the factors include public interest and safety factors considered?		
<b>6</b>	Has the applicant proposed alternative means of compliance with regulatory requirements including mitigation measures to ensure safety is not compromised?		
<b>7</b>	Has the applicant submitted all relevant documents to support the application?		
<b>8</b>	If certified, has the applicant provided the details of the certificate in force?		
<b>9</b>	Is the application for exemption submitted as part of an application of a certificate/ approval?		



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Checklist and evaluation of Exemption Package		Y/N	Satisfactory/ Not-satisfactory
10	Are there any known safety concerns that are yet to be addressed by the applicant?		
11	Has the applicant conducted and submitted a safety risk assessment for all the identified safety implications?		

Legal Considerations	Y/N	Specify if Yes
If granted, will this exemption infringe on any other CAAP regulatory requirements?		
If granted, will this exemption infringe on the provisions of any other laws of the State?		
Are there any other legal implications relative to this application?		



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Application for Exemption

Hazards Associated with Granting Exemption		
Description of Hazards	Consequence	Conditions/Mitigation Measures for Exemption

RISK ASSESSMENT After Conditions/Mitigation Imposed		
	Probability	Severity
Post Mitigation Risk Assessment		

Inspector Recommendation for Granting Exemption	
Evaluated by:	
Date:	



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**Terms, Conditions and Limitation.**

The CAA will in the interests of the Aviation Safety impose or specify terms, conditions and limitation to be complied with when granting an exemption from the specified requirements. State such Terms, conditions and Limitations below:


**Risk Assessment Matrix**

		Risk Severity				
		A - Catastrophic	B- Hazardous	C - Major	D - Minor	E - Negligible
Risk Probability	5 - Frequent	5A	5B	5C	5D	5E
	4 - Occasional	4A	4B	4C	4D	4E
	3 - Remote	3A	3B	3C	3D	3E
	2 - Improbable	2A	2B	2C	2D	2E
	1 - Extremely Improbable	1A	1B	1C	1D	1E



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Part B2 – Decision on Granting of Exemption

Department Director Review and Recommendation for Granting Exemption		
Evaluation	Y/N	Comments
Has the risk assessment been done using appropriate risk management tools?		
Is the risk assessment done by the applicant adequate for all the risks identified for this exemption application?		
Are the proposed alternative means of compliance, including the proposed mitigations appropriate for the management of the risks assessed?		
<b>Recommendation for Granting Exemption</b>		
<b>Reviewed by:</b> (Division Chief)		
<b>Date:</b>		
<b>Noted by:</b> (Department Manager)		
<b>Date:</b>		
<b>Endorsed by:</b> (Assistant Director General II, Flight Standards Inspectorate Service)		
<b>Date:</b>		



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**DIRECTOR GENERAL - EXEMPTION APPROVAL/REJECTION**

<b>Exemption Granted/Denied: .....</b>	
<b>Date granted: (DD/MM/YYYY).....</b>	
<b>Date of Expiry (DD/MM/YYYY).....</b>	
<b>Exemption to be Published by (RSD)</b>	
<b>Director General</b>	
<b>Director General Signature</b>	