AUTORIDADE REGULADORA DE AVIAÇÃO CIVIL DE MOÇAMBIQUE

Airworthiness Department

Telephone number: **258 21 465 416** *Fax Number:* **258 21 465 415**
Physical address: Alameda do Aeroporto, Maputo
Postal address: Caixa Postal 227, Maputo E-mail iacm@tvcabo.co.mz

Logo and Name of Maintenance Organization **CRS Serial No……**
IACM - AMO Approval Certificate No.

Work/Job Number: ……	**Certificate of Release to Service (CRS)** For Aircraft Inspection/ Defect Rectifications/Replacements/Minor Modifications Only	**Date Job Raised:** …….

Aircraft Type: ……	**Registration Marks:** …….	**Serial Number:** ……..

Details of Work Required:

	Description	**Part No.**	**Serial No.**	**Quantity**	**Batch No.**
Details of Replacement Parts					

Details of work carried out and Remarks: (Ref; Part 145.05.7 MOZCARs – specify dimensions/ test figures/tolerances where applicable)

Component Life Status: (where applicable)

Time Since New: ……... Cycles Since New: ……...

Or

Time Since Overhaul: ……..….. Cycles Since Overhaul: …….……..

"The undersigned certifies that the work specified was carried out in accordance with Mozambique Civil Aviation Regulations and in respect of that work the aircraft component is considered ready for release to service."

Certifying Personnel:

Name: …… Full Signature……..…… Category and Stamp…….Date…….