

FORM -10B APPLICATION FOR AIRWORTHINESS ASSESSMENT OF AIRBORNE STORE

In accordance with IMTAR - 21, Subpart C, 21.C1.4, 21.C2.3, 21.C3.1.4, 21.C4.2, 21.C6.1.2

1.	Reference	
1.1	Applicant's Reference	Date

2.	Applicant's Informat	ation		
2.1	Applicant Company			
2.1.1	Name and Address	Applicant Number		
	(As per Registration	(Company) Name		
	with Registrar of	Door/Street / Area		
	Companies, India)	Post Office		
	Companies Act, 2013	City / State		
	2010	PIN		
2.1.2	Contact Person	Title	□ Mr □ Ms	
	(Responsible for this	Name		
	application)	Last Name		
		Job title		
		Phone/Fax		
		Email (Official)		
2.2	Address for Commu	nication		
2.2.1	Address	(Company) Name		
	(Required for	Door/Street / Area		
	communication with regard to this application)	Post Office		
		City / State		
application)		PIN		
2.3	Organization Approval Details			
2.3.1	DOA Details	DOA Number		
	(if applicable)	DOA Validity		
		DOA Scope		
2.3.2	POA Details	POA Number		
	(if applicable)	POA Validity		
		POA Scope		
3.	Airborne Store Desc	irborne Store Description		
3.1	Name of the Store and Part Number	Not exceeding 30 words.		
3.2	Brief about the Store	Not exceeding 100 words. Shall include details of hardware and software/ CEH aspects (if applicable). Please add enclosure for additional details.		
3.3	Proposed IMTAR Sub-part	$\square 21.C1 \qquad \square 21.C2 \qquad \square 21.C3 \qquad \square 21.C4 \qquad \square 21.C5 \qquad \square 21.C6$		

	Edition Number: 1.0	Form Version Number: 1.0	Date: January 2021
--	---------------------	--------------------------	--------------------



FORM -10B APPLICATION FOR AIRWORTHINESS ASSESSMENT OF AIRBORNE STORE

4. Applicant's Declaration		
I declare that I am authorized by my organization to submit this application to CEMILAC and that all information provided in this application form is correct and complete.		
I acknowledge that I have read	and understood the IMTAR -21 .	
I understand that the submission	n of the application does not entitle certification cov	erage by CEMILAC.
Place		
Date	Name	Signature
Important Note: CEMILAC of signed and official seal stamport	does not accept applications without signature. P ed.	lease make sure that the application is
This Application should be sent	t by fax, e-mail or regular mail to:	
The Chief Executive (Airworthiness)		
Centre for Military Airworthiness & Certification (CEMILAC)		
Defence R&D Organization, Ministry of Defence		
Marathahalli Colony Post,		
Bengaluru - 560037		
Fax: +91 (0)80 25230856		
E-mail: chief@c	E-mail: chief@cemilac.drdo.in	

Edition Number: 1.0 Form Version Number: 1.0 Date: January 2021



FORM -10B APPLICATION FOR AIRWORTHINESS ASSESSMENT OF AIRBORNE STORE

Acknowledgement of Receipt of Application

1.	Applicant's Reference	Date	
	. Address (Required for communication with regard to this application)	(Company) Name	
2.		Door/Street / Area	
		Post Office	
		City / State	
		PIN	
3.	Airborne Store Title		

The application has been received at CEMILAC on ______. The application will be reviewed and status will be informed in due course of time.

Public Interface Cell, CEMILAC For Chief Executive (Airworthiness)

Edition Number: 1.0	Form Version Number: 1.0	Date: January 2021