

ODCA 307 – Change Acceptance Form



SECTION 1: APPLICANT DETAILS

APPLICANT DETAILS	
Name	
Name and Address of licence holder	
Accountable Manager	Name: Email: Phone No:
Project Lead	Name: Email: Phont No:

TYPE OF CHANGE:	
AERODROME	AIR NAVIGATION SERVICES
☐ Changes to the organisation	☐ Changes to the ANS Functional System
☐ Change to the Safety Management System	☐ Change to the Management System
☐ Changes affecting the Certification Basis	☐ Changes to MATS 2
☐ Changes affecting Terms of the Certificate	☐ Changes to provision of service
☐ Changes to Category of RFFS	☐ Instrument Flight Procedure review
☐ Changes to Low Visibility Procedures	☐ Changes to existing licence(s)
☐ Change of Accountable Manager	☐ Changes to CNS equipment
☐ Procedures requiring ODCA approval	☐ Other (Please provide further detail below)
☐ Changes that require ODCA prior approval	
☐ Changes that do not require ODCA prior approval	
☐ Proposed Alternative Means of Compliance	
☐ Other (Please provide further detail below)	

PLEASE PROVIDE FURTHER DETAILS IF 'OTHER' BOX TICKED:

REASON FOR CHANGE

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BRIEF DESCRIPTION OF CHANGE:

CONTROL OF WORK IN PROGRESS (if applicable)

Planned Start Date		Planned Completion Date	
Is aerodrome closed during Works in Progress (WIP)?	Yes/No	If 'No' please provide times of WIP	

Submission date to ODCA

Please also complete [Section 3](#) before submitting the form to ODCA

SECTION 2: DCA COMMENT/APPROVAL

DCA Comment/Approval

Comments:

Name		Position Held	
Signature		Date	

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SECTION 3: COMPLIANCE STATEMENTS

Description	Regulation	Compliance Statement (include reference to document where appropriate)	Supporting Documentation (e.g. Safety Assurance documentation)

If further pages required, please copy table onto next page