**Approval/acceptance of Accountable Manager/ Nominated Person(s)**

Accountable Manager/Nomination of Persons required by COMMISSION REGULATION (EU) No 965/2012 (as amended). Please complete the form in BLOCK CAPITALS.

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| 1. **Organisation**
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| **1.** Operator Name: **Click here to enter text.****2.** Address: **Click here to enter text.****3.** AOC number: **Click here to enter text.****5.** Contact person: **Click here to enter text.****7.** Phone number: **Click here to enter text.****8.** Email: **Click here to enter text.** |

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| 1. **PERSONAL DETAILS**
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| **1.** Name, surname: Title: **Click here to enter text.** Surname: **Click here to enter text.** **2.** Date of birth: **Click here to enter text.****3.** Proposed position: **Click here to enter text.****4.** Percentage of employment: **Click here to enter text.****5.** Email: **Click here to enter text.****6.** Phone number: **Click here to enter text.****7.** Qualifications relevant to the proposed position

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**8.** Management/Work experience relevant to the proposed position:

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| 1. **Signature**

The undersigned person confirms that the designated person fulfils all legal requirements and that all enclosed information is complete and true. |
| **1.** Name/Surname: **Click here to enter text.**Signature**2.** Date: **Click here to enter text.** |

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| 1. **LV CAA approval/acceptance**
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[ ]  **Accountable Manager:**

LV CAA has verified and approved the nomination, of Capt. /Mr/Ms. **Click here to enter Name.** as accountable Manager for Click here to enter Company. in accordance with COMMISSION REGULATION (EU) No 965/2012.

[ ]  **Nominated person:**

LV CAA has verified and accepted the nomination, of Capt. /Mr/Ms. **Click here to enter Name.** as:
Click here to enter Position. for **Click here to enter Company.**
in accordance with COMMISSION REGULATION (EU) No 965/2012.

This will enter into effect on **Click here to enter a date.**

**Names and signatures of authorised LV CAA staff members verifying compliance:**

Signature (POI):

**Click here to enter text.**

Date: **Click here to enter a date.**

Signature Head of Aircraft Operations Division :

**Click here to enter text.**

Date: **Click here to enter a date.**