**ADS-B Round 2 Installer Declaration Form**

## Purpose of this form

Attach a completed version of this form to your application for an Automatic Dependant Surveillance Broadcast (ADS-B) Rebate Program- Round 2.

## Who is this form for?

This form is to be completed by an approved installer to certify that an ADS-B system, that meets the requirements of the ADS-B grant program and applicable CASA legislation, has been installed correctly and passed functionality testing in your aircraft.

For more information refer to the grant guidelines available on [business.gov.au](https://business.gov.au/grants-and-programs/automatic-dependent-surveillance-broadcast-rebate-program#key-documents).

## Information needed to complete this form

The following information is required about your installation for us to process your grant:

* the aircraft type and registration
* list of key avionic components (including manufacturer, model number and serial number) of the avionics installed to achieve ADSB-Out, ADSB-In, or ADSB-In and Out capability, and whether each component is new or used
* certification of successful functional testing of the ADSB-Out, ADSB-In, or ADSB-In and Out installation
* signed certification by the approved installer with clear details of the approved installer’s name, contact details and if you hold an Aeronautical Reference Number (ARN) insert below.

For more information refer to the grant guidelines available on [business.gov.au](https://business.gov.au/grants-and-programs/automatic-dependent-surveillance-broadcast-rebate-program-round-2#key-documents).

### Installation Certifier Details

Who certified that the ADS-B installation meets the requirements of CASR Part 91 MOS sections 26.67 or 26.72A?

*Full Name* Click or tap here to enter text.

*ARN (if applicable)* Click or tap here to enter text.

*Contact phone number* Click or tap here to enter text.

*Email address* Click or tap here to enter text.

### Aircraft registration Details

What are the registration and aircraft details?

*Aircraft owner* Click or tap here to enter text.

*Registration numbers/letters* Click or tap here to enter text.

*Make and model of aircraft?* Click or tap here to enter text.

### ADS-B Equipment Installation Details

*What is the manufacturer and model number of the ADS-B equipment?*

Click or tap here to enter text.

*What is/are the serial number/s?*

Click or tap here to enter text.

*Is this new equipment?*

Choose an item.

*Any relevant further install information*

Click or tap here to enter text.

### ADS-B Installer Declaration

I declare that:

* I am authorised to make this statement and am an approved installer to certify the installation of avionics equipment in this make and model of aircraft.
* All statements in this application are true and correct in every particular and that I have read and understood all provisions of the Civil Aviation Safety Regulations 1998 (CASR) which are relevant to this declaration.
* The installed equipment complies with the standards of Section 26.67 or 26.72A of the CASR Part 91 Manual of Standards.
* The ADSB-Out, ADSB-In, or ADSB-In and Out installation passed all functional tests.
* I consent to the Department of Industry, Science and Resources using and disclosing my personal information in accordance with the Department’s [Privacy Statement](https://www.industry.gov.au/sites/default/files/2020-04/diser-privacy-policy.pdf) including exchanging the information with Commonwealth government agencies.
* I acknowledge that knowingly making a false or misleading statement in this application is an offence against the [Criminal Code Act 1995 (Cth)](https://www.legislation.gov.au/Series/C2004A04868).

Full name of Approved Installer Click or tap here to enter text.

Date Click or tap to enter a date.

[Insert Installer Signature block]