

To be filled out by Applicant and sent to:

CROATIAN CIVIL AVIATION AGENCY  
 Flight Operations Department (FOD)  
 HR-10002 ZAGREB, Ulica grada Vukovara 284

**PART 1 - MEL DEFECT**

1. Operator	2. Date of Defect	3. Aircraft Registration	4. Aircraft Type	5. RIE Number
6. Detail of Defect		7. Reason for not rectifying		
8. Rectification Interval Category	9. Expiry date of Rectification Interval		10. MEL Reference Number	

**PART 2 – RIE APPLICATION**

11. Name of Applicant	12. Position
13. Why an RIE is required	

**PART 3 – AUTHORISATION**

14. Duration of RIE authorised	15. Latest date that defect is due for rectification	
16. Comments of Authorising Manager (To include history of previous RIE use for this item)		
17. Name of Authorising Manager	18. Position	19. Date