

AUSTRALIAN SPORT ROTORCRAFT ASSOCIATION INC

F006 GYROPLANE LISTING-MAJOR MODIFICATIONS-REPAIR & TRANSFER 2024



ABN 53 412 417 012

CASA Regulations state that only current financial ASRA members are permitted to fly and list a Gyro

ASRA Membership No:	A	Gyroplane Listing No:	G	Airframe Serial No:
Registrant Given Names:		Registrant Family Name:		
Address:		Phone No:		
Town:		State:		P/Code:
Email:				
<input type="checkbox"/> (A) New Listing (Compliant Gyros only) or Renewal of Listing (only for <=3 years lapsed listed gyros)				
<input type="checkbox"/> (B) Transfer of ownership The seller must advise ASRA of a change of ownership and enter the buyer details below. Once a TA inspection is signed or completed online, the buyer will be emailed an invoice for the transfer fee. *** The seller has provided the buyer with all documents and manuals pertaining to the gyroplane. ***				
ASRA No:	A	Buyer Name:		Phone No:
Address:		State:		
		P/Code:		
<input type="checkbox"/> (C) Post-Component-Failure Inspection Notification <input type="checkbox"/> (D) Post-Damage-Major Repair Inspection Notification				
<input type="checkbox"/> (E) Notification of recent Major Modifications <input type="checkbox"/> (F) Post-Grounding Order-Inspection <input type="checkbox"/> (G) Other (add detailed comments and amend gyro details)				
Cockpit:	<input type="checkbox"/> Open Frame	<input type="checkbox"/> Semi Enclosed	<input type="checkbox"/> Fully Enclosed	Empty weight including rotors: _____ kg
Places:	<input type="checkbox"/> One	<input type="checkbox"/> Two Side by Side	<input type="checkbox"/> Two Tandem	MTOW: _____ kg
Aircraft Status:	<input type="checkbox"/> Listed	<input type="checkbox"/> Lapsed Listing	<input type="checkbox"/> Destroyed	Gyroplane Primary Colour: _____
Hang Test: 1 UP	_____ Degrees	<input type="checkbox"/> Nose up	Controls Fore/Aft Angle: _____	Controls Side/Side Angle: _____
Hang Test: 2 UP	_____ Degrees	<input type="checkbox"/> Nose down		Total Teeter Angle: _____
Gyroplane Manufacturer:		Model:		Model No: _____
Main Frame Material:		Size: _____ mm	Mast Material:	Size: _____ mm
Frame Plates Material:		Thickness: _____ mm		
Vertical Tail Type & Area:	<input type="checkbox"/> Rudder & Fin	<input type="checkbox"/> Full Flying	<input type="checkbox"/> Twin Tail	<input type="checkbox"/> Tri Tail
Pitch Stabiliser Location & Area:	<input type="checkbox"/> In propeller slipstream	<input type="checkbox"/> Outside propeller slipstream		
Stabiliser Area:	_____ m ²	Horizontal Distance from C of G:	_____ m	
Rotor Head Manufacturer:		Serial No:		
Rotor Blade Manufacturer:		Rotor Blade Model:	Length: _____ ft	
Hub Bar Serial No:		Rotor Blade Serial Nos:	Blade 1: _____	Blade 2: _____
Propeller Manufacturer:		Serial No:	Diameter: _____ in	
Engine Manufacturer:	Type: _____	Engine No:	Engine Capacity: _____ cc	
Redrive Make:		Serial No:	Ratio: _____ : 1	
Fuel Tank Manufacturer:		Capacity: _____	LTS	

Mandatory Instruments	<input type="checkbox"/> ASI	<input type="checkbox"/> Altimeter	<input type="checkbox"/> Fuel Indicator	<input type="checkbox"/> Yaw Indicator
Ultralight Gyroplanes Mandatory Instruments	<input type="checkbox"/> Hour Meter	<input type="checkbox"/> Oil Pressure (4 stroke)	<input type="checkbox"/> Engine tacho	
	<input type="checkbox"/> Compass	<input type="checkbox"/> Voltmeter (Battery Ignition)	<input type="checkbox"/> Temperature	
Significant Extras	<input type="checkbox"/> GPS	<input type="checkbox"/> Transponder	<input type="checkbox"/> ELT	<input type="checkbox"/> VHF <input type="checkbox"/> UHF

**TO BE COMPLETED BY AN ASRA TECHNICAL ADVISER
FOR ALL NOTIFICATIONS (A to F) inclusive.**

I declare that I have inspected the above Gyroplane and checked that all the control movements are normal as specified in the applicable ASRA Inc. F022 or F024 Acceptance and Listing protocols. The Gyroplane complies with all the compliance requirements and the Safety Directives issued by ASRA. Safety Directives can be accessed at <https://www.asra.org.au/directives-and-alerts/> I take no responsibility for any modifications carried out after this date unless approved by me. I do not take any responsibility for the accuracy of the owner or manufacturer's statements, or the manner in which the Pilot operates the Gyro. This is an Application for Listing or Renewal and is not indicative of the flight readiness or performance of this aircraft

The Gyroplane qualifies for listing under the following category:	<input type="checkbox"/> Single Seat	<input type="checkbox"/> Two Seat	
	<input type="checkbox"/> Provisional <input type="checkbox"/> Basic <input type="checkbox"/> Compliant	<input type="checkbox"/> Provisional <input type="checkbox"/> Compliant	
Airframe Hours:	HRS	Engine Hours:	HRS

If Compliant - Manufacturers Type
ASRA Approval No: _____
 Technical Adviser's Name: _____ Membership No: **A** _____
 Signature: _____ Date: _____
 Description of failure/damage/defect and general comments:

Registrant's Signature:	Date:	Mandatory photos from the side and of any modified/repaired section of the gyroplane
*** Listing will not be issued without a current photo***		

Schedule of Fees

(Tick appropriate box) **DO NOT SEND CASH**

<u>Listing 2024</u> (Listing expires 31 st Dec 2024)	<input type="checkbox"/> \$31 (A) includes Gyroplane maintenance logbook. TA inspection required
Transfer – Purchaser (Must be an ASRA member)	<input type="checkbox"/> \$31 (B) TA inspection required

On receipt of your listing form an invoice will be sent to your email address.

Payment can be made online by credit card.

Alternatively, payments by cheque or Money Order are made payable to ASRA Inc.

Post listing form and cheque to: ASRA Registrar, PO Box 50 Hove SA 5048.

All documentation can be downloaded from the ASRA Website Members Zone <https://www.asra.org.au/member-zone/>

Contact the registrar@asra.org.au or 0403 285 478 if you have lost your log on details or do not have internet access.