



**NORWEGIAN DEFENCE MATERIEL AGENCY**  
*MILITARY AIRWORTHINESS AUTHORITY – NORWAY*

MAA-NOR Form 4

## Acceptance of Nominated Management Personnel

Details of Management Personnel required to be accepted as specified in

1. Name:
2. Position and org. number:
3. Qualifications relevant to the item (2) position:

4. Work experience relevant to the item (2) position:

*I declare that the form is completed accurately, and that I accept the role's responsibilities as required in the applicable regulations and as detailed in the responsibilities section of the organisation's exposition.*

Applicant's signature: \_\_\_\_\_

Date:

### MAA-NOR use only

Name and signature of authorised MAA-NOR staff member accepting this person:

Signature: \_\_\_\_\_

Date:

Name: Jon A. Olsen

Position: Head of MAA-NOR