# APPLICATION FOR RVSM APPROVAL

Completion of form: Each relevant box should be completed with a tick () or a (x). Where form must be completed by referring to a document of applicant`s documentation system, and manual reference, chapter and sub-chapter. Please ensure all applicable areas are completed.

# GENERAL

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| **General Information** |
| Applicant Name and Address: | Tel/Fax/e-mail | Contact Person Name/Tel/Fax/e-mail |
| Airplane Registration | airplane Manufacturer | airplane Type Designation/ Model Designation | airplane Serial Number | airplane Mode S Address Hexadecimal |
| Aircraft Area of Operation: |

**2. AIRWORTHINESS**

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| **Eligibility Airworthiness Documents** |
| 1. The approval of the RVSM systems installation is based on:
	* Type Design □ EASA STC □ Service Bulletin □ other (specify):
2. airplane Flight Manual (AFM) or AFM Supplement refers to following airworthiness approval basis for RVSM system installation:
	* JAA Temporary Guidance Leaflet (TGL) No.6 □ JAA Temporary Guidance Leaflet (TGL) No.23
* FAA Document 91-RVSM
	+ other (specify):
 |
| **Make and Model of Installed Navigation Equipment Required for RVSM Operations** |
| 3. | a) Altitude measurement system: Make: Model: b) SSR Transponder: Make: Model:1. Altitude alerting system: Make: Model:
2. Automatic altitude control system: Make: Model:
 |
| Other (specify): |
| **Maintenance Program** | **Yes** | **No** |
| 4. The applicant should have an established Maintenance Program that contains all RVSM related  |  |  |

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| maintenance requirements proscribed by manufactured or design organization? RVSM Maintenance program established ? | □ | □ |
| **Minimum Equipment List** |  |  |
| **5. The Applicant should have revised parts of Minimum Equipment List to reflect system requirements (e.g. redundancy levels) appropriate to the intended RVSM operations?****Minimum Equipment List revised ?** | □ | □ |
| **Maintenance Practices and Procedures (CAME; MOE, etc.)** |
| The applicant must institute procedures in respect of continuing airworthiness practices for RVSM. These procedures should cover the following subjects: | ***To be completed by applicant***RVSM Maintenance Practices and Procedures are described in (Add manual r**eference, chapter and sub-chapter** |

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| **6.** Maintenance of RVSM equipment (adherence to manufacturer`s maintenance instructions, modification procedures, system calibration policy, leak check policy, skin waviness checks, autopilot/Automatic altitude control maintenance practices, handling on-board systems, etc.) |  |
| 7. Action for non-compliant airplane (downgrading reporting to ACAA, response to inquiries from EUR RMA, corrective actions, upgrading, etc.) |  |
| 8. Maintenance Training (training of applicant`s maintenance management staff, initial training, recurrent training of contractor`s maintenance personnel, initial training, recurrent training, training syllabi, etc.) |  |
| 9. Test Equipment (use of test equipment, handling, calibration, etc.) |  |

# 3.OPERATION

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| **Operating Practices and Procedures (\*)** |  |
| The applicant must institute RVSM Operating Practices and Procedures. These practices and procedures should cover the following subjects: | *To be completed by applicant*RVSM Operating Practices and Procedures are described in (add manual reference, chapter and sub- chapter) |
| 1. **Flight planning**

AMC2 SPA.RVSM.105(a)1. **Pre-flight procedures**

AMC2 SPA.RVSM.105(b)  |     |
| 1. **Prior to RVSM airspace entry**

AMC2 SPA.RVSM.105(c)1. **In-flight procedures**

AMC2 SPA.RVSM.105(d)1. **Post-flight procedures**

AMC2 SPA.RVSM.105(e) |  |
| **Flight Crew Training and Qualification (\*)** |

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| The applicant is requires to establish the following (covering subjects under 3.1 to 3.5): | *To be completed by applicant*Description in (add manual reference, chapter and sub- chapter) |
| 6. Flight Crew qualification requirements: |  |
| 7. Description of initial and recurrent training, checking-and training-syllabi. AMC2 SPA.RVSM.105(f) |  |

1. **FOR OFFICIAL ACAA USE ONLY**

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| **Subject** | **Responsible** | **Date** | **Name &Signature:** |
| 1. O3-2.OPSMAN-01.FRM.002 and item 4 application package checked for completeness. | OPS |  |  |
| 2. Airworthiness Approval granted (Appendix to Certificate of Airworthiness). | AWI |  |  |
| 3. Operational Approval granted (applicant`s operating practices, procedures and training programs have found in compliance with applicable requirements) | OPS |  |  |
| 4. Notification of RVSM Approval submitted to EUR RMA | OPS |  |  |
| 5. RVSM approval process administratively completed (OPS Update, and Exchange of Certificates). | OPS |  |  |
| ***Withdrawal of RVSM Approval****Reason:**Notification to CMA and/or USC by:**Name: Date:* *Signature:*  |