

Navigation Authorisation Application – RVSM – NAT-HLA (MNPS) – PBCS



This form can be filled in on screen (preferred method) then printed, signed and submitted as instructed. Alternatively, print, then complete in BLOCK CAPITALS using black or dark blue ink

FALSE REPRESENTATION STATEMENT

It is an offence under the UK Air Navigation Order to make, with intent to deceive, any false representation for the purpose of procuring the grant, issue, renewal or variation of any certificate, licence, approval, permission or other document. This offence is punishable on summary conviction by a fine, and on conviction on indictment with an unlimited fine or up to two years imprisonment or both.

1. APPLICANT TYPE

Individual	Complete Section 2(a)	Charity	Complete Section 2(b)
Partnership	Complete Section 2(a)	Ministry of Defence	Complete Section 2(c)
Private Clubs	Complete Section 2(a) unless a Limited Liability Partnership or Limited Company	Trust	Complete Section 2(c)
Limited Liability Partnership	Complete Section 2(b)	Public Educational Establishment	Complete Section 2(c)
Limited Company	Complete Section 2(b)	(University/College)	

2. APPLICANT DETAILS (The Applicant is the person responsible for payment of CAA charges)

This application will be considered in respect of and, if appropriate, granted or issued to, the applicant(s) named below.

a) Individual (including sole traders and partnerships)

Title: Forename: Surname:
Address:
Country: Postcode:
Telephone: Fax:
E-mail: Mobile Telephone:
Trading Name: (if applicable)
Website address:
In the case of a partnership, please complete details of all partners. Continued on a separate sheet.

This application will be considered in respect of and, if appropriate, granted to, the Company Name as registered under the Company Number provided on this form.

b) A Company

Registered Company Name (in full):
Registered Company Number:
Country of Company Registration:
Registered Office Address:
..... Postcode:
Telephone: Fax:
E-mail:
Trading Name: (if applicable)
Trading Address: (primary site)
Country: Postcode:
Website address:

Authorised Representative of Company

This application is to be signed by either a Director or Company Secretary or a person authorised by the Board to act on behalf of the Company.

Title: Forename: Surname:

Position in Company:

Telephone No: E-mail:

If you are not a Director or Company Secretary and have been authorised to sign the application form on behalf of the Company, proof of that authority must be provided with the completed application form.

This application will be considered in respect of and, if appropriate, granted or issued to, the applicant(s) named below.**c) An Unincorporated Association or other body**

Name of Unincorporated Association or other body:

Address:

Country: Postcode:

Telephone: Fax:

E-mail: Mobile Telephone:

Website address:

Authorised Representative

This application is to be signed by a person or persons authorised by the body named above to act on behalf of it. This should normally be a member or members of the managing committee of the association or other body. Evidence of the authorisation to act on behalf of the association or body should be provided with the application.

Title: Forename: Surname:

Position:

Charity Number (if applicable):

3. ADDRESS FOR CORRESPONDENCE (if different from above)

Postal Address (if different from above):

..... Postcode:

4. CAA ORGANISATION APPROVAL NUMBER

AOC/NCC Declaration No:

5. TECHNICAL INFORMATION SPECIFIC TO EACH FORM

Aeroplane type, series, manufacturer serial number(s), registration mark(s), mode "S" address code(s), date(s) of modification or certification of the airframe(s) for RVSM.

Aeroplane Type	Aeroplane Series	Manufacturer(s) Serial Number	Registration	Model "S" Code (hex)	RVSM Modification / Certification Date



Documents

Document Sharing Hub

6. Type of Application- must be completed for any application to be processed.

a) Please confirm:

As an Operator is this an 'Initial' Application or relates to a Type Variation for either RVSM, NAT-HLA or PBCS	YES	NO
Is this an application to add an aircraft registration to current approvals/authorisations	YES	NO

7. RVSM OPERATIONAL APPROVAL

Refer to the accompanying Notes and "JAA Administrative and Guidance Material, Section 1 – General Guidance and Reference Material, Temporary Guidance Leaflet No 6, Revision 1", (see <http://www.ecacnav.com/rvsm>) and UK AIP Gen 1-5-1 for further guidance (see <http://www.nats-uk.ead-it.com>).

a) List those ICAO Regions for which this RVSM Operational Approval request is made. If the applicant wishes to operate in oceanic or remote airspace where RVSM is required additional NAT-HLA (MNPS) approval will be required.

Oceanic and Remote RVSM airspace.	YES	NO
Metric airspace areas:	YES	NO
Continental RVSM airspace.	YES	NO

b) RVSM Airworthiness Elements

Note: Documented Objective Evidence and/or Extracts of manuals must be provided to support answers listed below

i)	Does the Aircraft Build and/or Modification status confirm the aircraft is RVSM compliant?	YES	NO
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Note: Include references to the manufacturer's statement of RVSM compliance (if applicable).

If Yes, provide details:

Tick Appropriate box: New Build By Modification

ii)	Has any repair been embodied on the Aircraft which may affect RVSM compliance?	YES	NO
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Note: This could be related to static ports, skin waviness or to Altitude reporting systems.

If Yes, provide details:

iii)	Does the CAME include RVSM procedures to support RVSM operations and monitoring?	YES	NO
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If Yes, provide details:

iv)	Does the Maintenance Programme embody all tasks and associated requirements for RVSM operations?	YES	NO
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If Yes, provide details:

v)	Does the Reliability Programme (if applicable) embody all requirements for RVSM operations?	YES	NO
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If Yes, provide details:

b) RVSM Airworthiness Elements (Continued)

vi) Does the Operators MEL embody all maintenance procedures and processes for upgrade/downgrade of RVSM due to system failures within RVSM critical systems? YES NO

If Yes, provide details:

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vii) Does the contracted Part 145 Maintenance Organisation procedures support RVSM upgrade/downgrade processes and control of Aircraft geometric inspection techniques? YES NO

If Yes, provide details:

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viii) Has RVSM training for the CAMO and Contracted Part 145 Organisations staff been completed? YES NO

If Yes, provide details:

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ix) State Continued Airworthiness Management Organisation (Part M Subpart G) details:

Name: Approval Number:

Address:

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Contract reference:

Maintenance Programme Reference:

x) State (Part 145) Maintenance Organisation or equivalent details:

Name: Approval Number:

Address:

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Contract reference:

Refer to EC 965/2012 Subpart D, operations in airspace with Reduced Vertical Separation Minima (RVSM), AMC3 SPA.RVSM.105 RVSM operational approval and JAA Temporary Guidance Leaflet No 6.