



**REPUBLIC OF SAN MARINO
CIVIL AVIATION AUTHORITY**

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APPLICATION FOR OPERATIONAL CREDIT (GENERAL AVIATION)

A vertical line in the margin indicates an amendment to the previous version.

| 1. DETAILS OF AIRCRAFT | | | |
|---|--|---|----------------|
| Registration Mark: | T7- | | |
| Manufacturer's Designation of Aircraft: | | | |
| Serial Number: | | | |
| 2. DETAILS OF AIRCRAFT OPERATOR | | | |
| Name of Operator: | | | |
| Nominated Coordinator: | | | |
| Telephone No.: | | Email: | |
| 3. EQUIPMENT | | | |
| System type: | HUD | EVS | OTHER (state): |
| Type, Make & Model: | | | |
| Proposed credit DH/RVR: | DH (ft): | RVR (m): | |
| 4. SUPPORTING DOCUMENTATION <i>(regardless of proposed utilisation)</i> | | | Tick |
| AFM, AFM Supplement or STC | Letter(s) from manufacturer attesting compliance OR Type Certificate/Aircraft Flight Manual (AFM) OR Supplemental Type Certificate (STC) | | |
| MMEL/MEL | Reference or proposed amendment | | |
| Operations Manual & SOPs | <i>Provide system references</i> | | |
| Normal and Abnormal checklists | <i>Provide system references</i> | | |
| Safety risk assessment | <i>In accordance with SMS</i> | | |
| 5. DECLARATION OF COMPLIANCE | | | Tick |
| Required Instruments & equipment | Installed | | |
| Data collection, evaluation and trend monitoring | System established | | |
| Adequacy of maintenance & repair programme | Established and determined to be acceptable | | |
| Training – Pilot initial/recurrent | Conducted to formal syllabus | | |
| 5. APPLICANTS DECLARATION | | | |
| The undersigned certifies that the above items ticked indicate that the aircraft systems installation, continuing airworthiness of systems, minimum equipment for dispatch, operating procedures and flight crew training comply with the applicable requirements of CAR OPS 2A or CAR OPS 2H, as applicable. | | | |
| Date: | | | |
| Name of Flight Operations Manager: | | Signature of Flight Operations Manager: | |