



**REPUBLIC of SAN MARINO
CIVIL AVIATION AUTHORITY**

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APPLICATION FOR PERFORMANCE BASED COMMUNICATIONS & SURVEILLANCE (AOC)

<input type="checkbox"/> REQUIRED COMMUNICATION PERFORMANCE (RCP 240)		<input type="checkbox"/> REQUIRED SURVEILLANCE PERFORMANCE (RSP 180)	
1. AIRCRAFT DETAILS			
Registration Mark:	T7-		
Manufacturer's Designation of Aircraft:			
Serial Number:			
2. DETAILS OF AIRCRAFT OPERATOR			
Name of Operator:			
Nominated Coordinator:			
Telephone No.:		Email:	
3. SUPPORTING DOCUMENTATION			<i>tick if attached</i>
Proof of required equipment & RCP and/or RSP capability	Letter(s) from manufacturer OR Type Certificate Aircraft Flight Manual (AFM) or Supplemental Type Certificate (STC)		<input type="checkbox"/>
MEL	Reference or proposed amendment		<input type="checkbox"/>
Previous RCP and/or RSP approval	<i>(if applicable)</i>		<input type="checkbox"/>
Adequacy of maintenance support	Attestation from maintenance organisation		<input type="checkbox"/>
Operations Manual (SOPs)	OMA reference or proposed amendment		<input type="checkbox"/>
Aircraft checklists (e.g. QRH)	OMB reference or proposed amendment		<input type="checkbox"/>
Provision of information	OMC reference or proposed amendment		<input type="checkbox"/>
Training - Pilot	OMD reference or proposed amendment		<input type="checkbox"/>
Agreement with Communication Service Provider	<i>(if applicable)</i>		<input type="checkbox"/>
4. APPLICANTS DECLARATION			
The undersigned certifies that the above information to be correct and that the aeroplane systems installation, continuing airworthiness of systems, minimum equipment for dispatch, operating procedures and flight crew training comply with CAR OPS 1/3 <i>(as applicable)</i> .			
Date:			
Name of Flight Operations Postholder:		Signature of Flight Operations Postholder:	