**С политиката за защита на личните данни в ГД ГВА може да се запознаете на интернет страницата на ГД ГВА – раздел „За ГД ГВА“, Политика на защита на личните данни в Главна дирекция „Гражданска въздухоплавателна администрация“ -** [**https://www.caa.bg/bg/category/747/8879**](https://www.caa.bg/bg/category/747/8879)

|  |  |
| --- | --- |
| **ПОПЪЛВА СЕ ОТ ГД ГВА / *BG CAA USE ONLY*** | **САО №** (ако има) ***/ AOC №*** *(if applicable)* |
| № / *Reference No* | **BG \_\_\_** |
| Дата / *Date*  |

|  |  |
| --- | --- |
| **I.** | **ОБЩА ИНФОРМАЦИЯ / *GENERAL INFORMATION*** |
| 1. | Име на организацията  |  |
| *Name of Organization* |  |
| 2. | Eдинен идентификационен код (ЕИК)*Unified Identification Code (UIC)* |  |
| 3. | Адрес на регистрация |  |
| *Legal seat* |  |
| 4. | Адрес на опериране (ако е различен от този на регистрация)  |  |
| *Address of operation* *(if different from that of legal seat)* |  |
| 5. | Телефон / *Phone* |  |
| 6. | Факс / *Fax* |  |
| 7. | Електронен адрес / *E-mail* |  |
| 8. | Интернет адрес / *Home page* |  |
| 9. | Вид на организацията / *Type of organisation* | **COMPLEX** |  | **NON-COMPLEX** |  |
| 10. | Отговорен ръководител (име, презиме, фамилия) |  |
| *Accountable Manager (name, middle name, Surname)* |  |
| 11. | EFB администратор:(име, презиме, фамилия) |  |
| *EFB Administrator: (name, middle name, Surname)* |  |
| 12. | Телефон / *Phone* |  |
| 13. | Електронен адрес / *E-mail* |  |
| 14. | Дата / *Date* |  |

| **II.** | **Летища / Aerodromes.** |
| --- | --- |
| 1. | IATA Code | ICAO Code |  | **Моля попълнете**/Please fill: |
| 2. |  |  | **Навигационни средства за кацане**Navigational and landing aids |  |
| 3. |  | **Ръководство въздушно движение**Air traffic control | **ДА*****YES*** | **НЕ*****NO*** | Работно време:Hrs of operation |  |
| 4. |  | **МТО доклад**Weather report | **ДА*****YES*** | **НЕ*****NO*** | **Първа помощ**First Aid | **ДА*****YES*** | **НЕ*****NO*** |
| 5. |  | **Зарядка с гориво**Refueling facilites | **ДА*****YES*** | **НЕ*****NO*** |  |
| 6. |  |  | **Навигационни средства за кацане**Navigational and landing aids |  |
| 7. |  | **Ръководство въздушно движение**Air traffic control | **ДА*****YES*** | **НЕ*****NO*** | Работно време:Hrs of operation |  |
| 8. |  | **МТО доклад**Weather report | **ДА*****YES*** | **НЕ*****NO*** | **Първа помощ**First Aid | **ДА*****YES*** | **НЕ*****NO*** |
| 9. |  | **Зарядка с гориво**Refueling facilites | **ДА*****YES*** | **НЕ*****NO*** |  |
| 10. |  |  | **Навигационни средства за кацане**Navigational and landing aids |  |
| 11. |  | **Ръководство въздушно движение**Air traffic control | **ДА*****YES*** | **НЕ*****NO*** | Работно време:Hrs of operation |  |
| 12. |  | **МТО доклад**Weather report | **ДА*****YES*** | **НЕ*****NO*** | **Първа помощ**First Aid | **ДА*****YES*** | **НЕ*****NO*** |
| 13. |  | **Зарядка с гориво**Refueling facilites | **ДА*****YES*** | **НЕ*****NO*** |  |
| 14. |  |  | **Навигационни средства за кацане**Navigational and landing aids |  |
| 15. |  | **Ръководство въздушно движение**Air traffic control | **ДА*****YES*** | **НЕ*****NO*** | Работно време:Hrs of operation |  |
| 16. |  | **МТО доклад**Weather report | **ДА*****YES*** | **НЕ*****NO*** | **Първа помощ**First Aid | **ДА*****YES*** | **НЕ*****NO*** |
| 17. |  | **Зарядка с гориво**Refueling facilites | **ДА*****YES*** | **НЕ*****NO*** |  |
| 18. |  |  | **Навигационни средства за кацане**Navigational and landing aids |  |
| 19. |  | **Ръководство въздушно движение**Air traffic control | **ДА*****YES*** | **НЕ*****NO*** | Работно време:Hrs of operation |  |
| 20. |  | **МТО доклад**Weather report | **ДА*****YES*** | **НЕ*****NO*** | **Първа помощ**First Aid | **ДА*****YES*** | **НЕ*****NO*** |
| 21. |  | **Зарядка с гориво**Refueling facilites | **ДА*****YES*** | **НЕ*****NO*** |  |

| **III.** | **Самолети/ Aeroplanes** |
| --- | --- |
|  | **Aeroplane Type** | **MSN Numbers** | **Registration Marks** |
| **1.** |  |  |  |
| **2.** |  |  |  |
| **3.** |  |  |  |
| **4.** |  |  |  |
| **5.** |  |  |  |
| **6.** |  |  |  |
| **7.** |  |  |  |
| **8.** |  |  |  |
| **9.** |  |  |  |
| **10.** |  |  |  |

| **IV.** | **ПРИЛОЖЕНИЯ КЪМ ЗАЯВЛЕНИЕТО / *APPLICATION ATTACHMENTS*** | **ДА*****YES*** | **НЕ*****NO*** |
| --- | --- | --- | --- |
| 1. | Proof of required equipment/ Type Certificate Aircraft Flight Manual (AFM) or Supplement Supplemental Type Certificate (STC)  |  |  |
| 2. | Previous isolated aerodrome approval/ if applicable  |  |  |
| 3. | OM Part A |  |  |
| 4. | OM Part B |  |  |
| 5. | OM Part C |  |  |
| 6. | OM Part D |  |  |
| 7. | Training records- line training/sim programs/record forms, airport briefing forms |  |  |
| 8. | MEL (if applicable) |  |  |
| 9. | Operational Risk Analysis  |  |  |
| 10. | Dispatch training |  |  |
| 11. | Compliance Checklist PART- SPA\_ISA  |  |  |

| **V.\*** | **ЛЕТАТЕЛНА ГОДНОСТ / *AIRWORTHINESS*** |
| --- | --- |
| **Type Design Approval for referenced Aircraft Type Designation** |
| 1. |  | **ДА*****YES*** | **НЕ*****NO*** |
|  | Aircraft Flight Manual |  |  |
| Aircraft Flight Manual Supplements |  |  |
| Type certification Data sheet |  |  |
| Supplemental Type Certificate |  |  |
| Other  | (Description) |  |  |
| **Minimum Equipment List (MEL) (\*)** | YES | NO |
| 2. | The applicant should revise the relevant parts of to reflect system requirements (e.g. redundancy levels) appropriate to the intended isolated aerodrome operations. Minimum Equipment List revised? |  |  |

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| **VI.\*** | **ЧЕКЛИСТ ЗА СЪОТВЕТСТВИЕ / COMPLIANCE CHEKLIST** |
| **Isolated Aerodrome Approval Compliance Statement and Checklist** |
| These procedures should cover the following subjects: | ***To be completed by applicant***Maintenance Practices and Procedures are described in (add manual reference, chapter and subchapter): |
| 1. | IAW with CAT.OP.MPA.106 if the operator operates aeroplanes with reciprocating engines, fuel to fly for 45 minutes plus 15% of the flying time planned to be spent at cruising level or 2 hours, whichever is less; |  |
| 2. | or for aeroplanes with turbine engines, fuel to fly for 2 hours at normal cruise consumption above the destination aerodrome, including final reserve fuel IAW with CAT.OP.MPA.106. |  |
| 3. | The operator has reviewed the aerodrome and has ensured that it meets the criteria of an adequate aerodrome as defined in CAT.OP.MPA 107 |  |
| 4. | The operator has a procedure for reviewing the number of runways, approach aids and the likely accuracy of NOTAMS |  |
| 5. | The operator has a procedure for the review of the climatology of the aerodrome and the likely accuracy of forecasts |  |
| 6. | The operator has a procedure for managing flight crew recency and training requirements at each aerodrome |  |
| 7. | The operator has a clearly defined Fuel Policy IAW requirements contained in AMC1 CAT.OP.MPA 150 (b). |  |
| 8. | The operator has a procedure for planning minima including a Pre-Determined Point procedure referred to in AMC1 CAT.OP.MPA. 150 (b) paragraph (d). |  |
| 9. | The operator has a procedure for In-Flight Fuel Management IAW with CAT.OP.MPA.185 (c) and CAT.OP.MPA.280 (b) (4) (ii) |  |

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| **VIII**. | **ДЕКЛАРАЦИЯ НА ЗАЯВИТЕЛЯ / *applicant’s DECLARATION*** |
|  | *We, the undersigned of behalf of………..……… Air Operator, holder of AOC BG….. hereby confirm that the application form and compliance checklists PART- SPA\_ISA are in accordance with the COMMISSION REGULATION (EU) No 965/2012 of 5 October 2012 laying down technical requirements and administrative procedures related to air operations pursuant to Regulation (EC) № 1139/2018 of the European Parliament and of the Council.* *Ние, долуподписаните от страна на ………………..авиационен оператор, притежаващ САО BG…….декларираме съответствието на Заявлението и приложената контролна карта PART- SPA\_ISA съгласно изискванията на Регламент (ЕС) № 965/2012 на Комисията от 5 октомври 2012 година за определяне на технически изисквания и административни процедури във връзка с въздушните операции, в съответствие с Регламент (ЕО) № 1139/2018 на Европейския парламент и на Съвета и във връзка с неговите изменения и допълнения, както и с приемливите средства за съответствие* |
| **Ръководител Съответствие**:*Compliance Manager* |  | **Подпис:***Signature:***Дата:***Date:* |  |
| **Отговорен Ръководител:***Accountable Manager* |  | **Подпис:***Signature:***Дата:***Date:* |  |

**INSTRUCTIONS FOR COMPLETING THE FORM**

Each relevant Box should be completed with a (X). Items marked with an asterisk (\*)to be completed only for first aeroplane of each aeroplane type / model in operators fleet. Where form must be completed by referring to a document of applicant’s documentation system, add manual reference, chapter and sub-chapter. Please ensure all applicable areas are completed.