



SECTION:	GENERAL TECHNICAL FORMS	GTF-AOC-001
TITLE:	APPLICATION FOR AOC AND OPERATIONS SPECIFICATIONS	

INITIAL ISSUE* / AMENDMENT* / RENEWAL OF:

AIR OPERATOR CERTIFICATE/ OPERATIONS SPECIFICATIONS

Attach applicable relevant form: [GTF-NPA-001](#), [GTF-SOS-001](#), [GTF-AMA-001](#), [FOF-RTL-001](#)

FOR: <input type="checkbox"/> AIR CARRIER, <input type="checkbox"/> AIR TRANSPORT, <input type="checkbox"/> PRIVATE OPERATOR, <input type="checkbox"/> OTHERS:			
1. Applicant data: DD/MM/YYYY		2. Sponsor*	
Operator:		Name:	
Address:		Address:	
Phone/Fax:		Phone/Fax:	
Email:		Email:	
3. Principal Base of Operations (*):		4. Principal Base of Maintenance (*):	
Facility Name:		Facility Name:	
Address:		Address:	
Phone/Fax:		Phone/Fax:	
Email:		Email:	
5. Maintenance Arrangements(Yemen & Foreign) (*):		6. Crew Training Arrangements (*):	
Facility Name:		Facility Name:	
Address:		Address:	
Phone/Fax:		Phone/Fax:	
Email:		Email:	
7. Personnel Accepted/to be approved by the Authority*			
Personal	Name	Contact Number	Email
Accountable Manager			
PH Flight Operations			
PH Maintenance			
PH Quality Assurance			
PH Ground Operations			
PH Training			
PH Security			
PH SMS/Safety			
Dangerous Goods Officer			
Cabin Crew/Others:			
PH Engineering/CAMO			



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8. Proposed Start Date:*	Operational Control *: (Agent name and contact/Flight Planning system)
DD/MM/YYYY	
9. Attachments: Complete A,B,C,D,E as attachments	
A. Organization Structure (Initial AOC/ Change organisation)	B. Financial Fitness Documentation (Initial AOC)
C. Duly filled Statement of Compliance by completing form FOF-OMA-001 or FOF-OMA-005 . (Only applicable to AOC/.POC renewal)	
D. Latest financial audit report or equivalent (Only applicable to AOC renewal)	
E. Payment slip for deposit and/or AOC fee (initial or renewal)	
F. Comments*: AOC /Ops. Spec change (Brief of changes in cover letter to amplify the detail)	

<input type="checkbox"/> *Statement of Compliance: I confirm that information in this application complies with the applicable regulations		
<input type="checkbox"/> *AOC Declaration Statement:		
I hereby, declare that I, as an Accountable Manager representing the above mentioned organization, confirm that the organization has NOT been suspended or revoked by any Civil Aviation Authority.		
Accountable Manager Name:		Signature:
Submission Date:	DD/MM/YYYY	

* Initial application or amendment that affects changes



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12. Aircraft details (for initial issue AOC/or amendment that have not been submitted previously)

AC No	Manufacturer	Make Model Series	AC REG	Mode S	MSN	Year Mfg	Engine [Mfg Model]	Pax no	MTOM/W (ton)	TCDS No	Lease	C of R date dd/mmm/yy	C of A date dd/mmm/yy
Sample:	Airbus	A300-600ST	AXC,AXB	896135	32423	2001	RR RB211	233	255	8962AFD	Y/.N	21/Jan/09	15/Jan/09
A													
B													
C													
D													
E													
F													
G													
H													
I													
J													
K													
L													
M													

13. Kind of Operations

a. Type: <input type="checkbox"/> Pax] <input type="checkbox"/> Cargo] <input type="checkbox"/> Ext load] <input type="checkbox"/> Aerial] <input type="checkbox"/> EMS] <input type="checkbox"/> DG]	b. Time: <input type="checkbox"/> Schedule] <input type="checkbox"/> Unscheduled]	c. Metric Altimetry: <input type="checkbox"/> Y] <input type="checkbox"/> N]
d. Category: <input type="checkbox"/> FW] <input type="checkbox"/> RW] <input type="checkbox"/> ML] <input type="checkbox"/> BL]	e. Met : <input type="checkbox"/> VFR] <input type="checkbox"/> IFR] <input type="checkbox"/> Day]	f. Area: <input type="checkbox"/> Yemen / <input type="checkbox"/> coordinate/ <input type="checkbox"/> Airports/ <input type="checkbox"/> Routes :
14. Operational Communications Navigations		a. RVSM: <input type="checkbox"/> Y] <input type="checkbox"/> N]
b. MNPS: <input type="checkbox"/> Y] <input type="checkbox"/> N]	c. EFB(Class/Type): [/]	d. GPS APP: <input type="checkbox"/> Y] <input type="checkbox"/> N]
g. ETOPS: <input type="checkbox"/> N] <input type="checkbox"/> Y:DivTime[min/Nm] [/]	h. Reserved	e. HUD/ HGS: <input type="checkbox"/> Y] <input type="checkbox"/> N]
j. LVO: <input type="checkbox"/> N] / <input type="checkbox"/> CATII [/]		f. CPDLC: <input type="checkbox"/> Y] <input type="checkbox"/> N]
i. SPIC: <input type="checkbox"/> N] / <input type="checkbox"/> Y: Airport:		k. LVTO: <input type="checkbox"/> N]/ <input type="checkbox"/> 125] <input type="checkbox"/> 150] <input type="checkbox"/> 175]
l. Other Nav/ com / Eqpt:		

n. Remark for entry that does not cover in the above list:

Note: For initial Special Operations use [GTF-SOS-001](#) form. See instructions next page (the instructions are not part of this application).



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APPLICATION GUIDE AND REQUIREMENT

Attach applicable relevant form for amendment /renewal (*all form required for initial formal AOC)

[GTF-NPA-001](#), Nominated Personnel Approval

[GTF-SOS-001](#), Special Operations (RVSM, ETOPS, MNPS, PBN,

[GTF-AMA-001](#), Aircraft and Organisation Manual Approval

[FOF-RTL-001](#), Radio Telephony and ICAO Three letter designation

A. Application for AOC and or Operations Specifications Requirements

1. Cover letter describing the intention such as initial renewal or amendment
2. For INITIAL ISSUE or RENEWAL of AOC all item must be filled, except item 12
3. For OPERATIONS SPECIFICATIONS, only affected changes to be filled

B. Amendment of

1. Operator Name : Attach Legal/contract/Trade license along with application of security clearances

2. Sponsor*: Attach Legal /contract/Board resolutions

3. Principal Base of Operations (*): attach contract with Airport authority or handling agent

4. Principal Base of Maintenance(*): attach contract with applicable AMO

5. Maintenance Arrangements(Foreign/ Yemen) (*): attach contract with applicable AMO

6. Crew Training (*): attach contract with applicable training organisation

7. Personnel Accepted (PH Post Holder)/to be approved by the Authority*: Attach contract & CV, for individual area the applicable requirement shall be attach/reflected:

- a. PH Flight Operations: Flight type and hours and past managerial experience/letter of previous employment
- b. PH Ground Operations CV reflecting previous managerial experience/letter of previous employment or Dispatcher license
- c. PH training, attach FI/TRI/TRE certificate or equivalent, CV shall contain AC type and flight hours and previous managerial experience/letter of previous employment
- d. PH Safety/SMS: Attach CV reflecting aircraft type for pilot/engineer or other supporting documents
- e. PH Quality: attach CV reflecting Quality area, Audit training and previous managerial experience/letter of previous employment/
- f. PH Maintenance: attach CV reflecting managerial experience in the area of maintenance, letter of previous employment.
- g. PH CAMO: attach CV reflecting managerial experience in the area of management of continuing airworthiness, letter of previous employment.

8. Proposed Start Date: * or expected expiry date (if renewed)

Operational Control *: (Agent name & contact of Flight Planning system and Software) for air transport for air carrier should be fully reflected in OM A

9. Organization Structure (initial AOC/Change organisation): Please attach a description of the applicant's business organization/structure and names and contact numbers of those entities and individuals having a major financial interest (share holder).



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10. Financial Data (initial/Renewal of AOC): Please attach sufficient financial data to support the financial viability of your proposal and to ensure there are adequate funds for a specified period after commencement of the operation.

11. Comments*: AOC/Ops. Spec change (brief of changes or in cover letter to amplify the detail) Statement of Compliance; I confirm that information in this application complies with the applicable regulations

12. Aircraft Details :

AC REG: Aircraft Registration, MSN: Manufacture Serial Number, Mfg: Manufacture, Pax: No of Passenger, TOW: Take-off weight/Mass, TCDS: Authority name & Type Certificate Data Sheet no, COR: Certificate of Registration, COA: Certificate of Airworthiness,

13. Kind of Operations

- a. Type: (Pax for Passenger) Cargo Ext load (external Load for Helicopter under slung operations) Aerial for aerial photography submit Airworthiness approval for Installation of equipment's EMS Emergency Medical Services DG for Dangerous Goods approved, attach Certificate or letter of DG approval]
- b. Time: Scheduled or Unscheduled type of operations
- c. Metric Altimetry for those aircraft who have embedded or capability to change the Altimeter display to metric unit
- d. Category: FW: Fixed Wing RW: Rotary Wing ML Micro-light/Ultra/LSA BL: Balloon]
- e. Meteorological Conditions
- f. Area of Operations : For scheduled operations shall submit aerodrome evaluation report to be added in the operations specifications

14. Operational Communications Navigations

- a. RVSM: For additional of aircraft attach application for RVSM Height Monitoring Program
- b. MNPS: For Initial MNPS and addition of aircraft, submit MNPS supporting document OMA & OMD
- c. EFB(Class/Type): attach EFB approval indicating Class & Type
- d. GPS APP: For initial approval, attach relevant OMA, OM D section & Training Records
- e. HUD/ HGS: For initial approval, attach relevant OMA, OM D section & Training Records
- f. CPDLC: Controller Pilot Data Link Communications
- g. ETOPS: attach ETOPS evaluation report
- h. PBN/RNP: Performance-Based Navigation for initial approval, attach relevant OMA, OM D sections & Training Records
- i. ULR: if yes, please state city pair
- j. LVO (Low visibility Operations) reduced CATI, CATII, CATIII, or HGS (Head Up Guidance System, Head Up Display, Enhanced Vision System) : For initial approval, attach relevant OMA, OM D section & Training Records
- k. LVTO: For initial approval, attach relevant OMA, OM D section & Training Records
- l. SPIC: (Special Pilot In Command) : For initial approval, attach relevant OMA, C, D & Training Records
- m. Other Nav/com/Eqpt: Fill in other equipment as required
- n. Remark: Fill any other entry that does not cover above or fill separate attachment