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| **A. Introduction** |
| The AOC Applicant /Operator’s North Atlantic High Level Altitude (NAT HLA) approval is a key safety assurance document and shall be submitted to the Authority together with the completed Statement of Compliance Checklist during the initial certification and subsequent amendments of the North Atlantic High Level Altitude (NAT HLA) requirements/approvals whenever there is a change, in States Laws and Regulations, management, operations specific approvals, change in facilities, Airworthiness Directives (AD), services or equipment, technology or procedures of an Operator in compliance with the requirements.  The statement is in a form of a complete listing of all parts of the Civil Aviation Authority applicable CAR OPS, CAR M regulations and any other CAA directives. In the case of new Applicant for a North Atlantic High-Level Altitude (NAT HLA) Approval, the Statement of Compliance Checklist shall be completed and submitted together with the formal application for operators’ manual approvals. The Statement of Compliance Checklist completed by the operator shall indicate in the Manuals how the relevant applicable Regulations to the proposed operations have been addressed. All supporting documents related to Application for statement of compliance with CAR OPS, shall be submitted to CAA Flight Safety Department/ Airworthiness Section.  The operator in compliance with other provisions promulgated in the regulations may require additional compliance with other regulations or specific approvals (e.g. ETOPS/EDTO, RVSM, CAR-100 Safety Management System, Quality Management System etc.). It is therefore the CAA requirement for an applicant of an AOC or AOC holders to complete and sign the relevant comprehensive sets of compliance checklists and forms. NAT HLA approval is conditional on a RVSM approval being granted.  All supporting documents related to Application for statement of compliance with ICAO NAT Doc 007, ICAO Doc 7030 MNPS, CAR OPS, CAR-MEL and CAR-M shall be submitted to CAA Flight Safety Department/ Airworthiness Section including a copy of the latest versions of the applicable documents and manuals. |
| **B. Filling Instructions:** |
| 1. Operator (Accountable Manager) is required to fill the following:    1. Column **C.** Organization Details.    2. Column Operator's Manual Ref No.    3. Sign and date column, **G,** this is to certify that the Operation Manuals are in compliance with Civil Aviation   laws and Regulations (CARs).   * 1. Tick in the box **☐** provided.  1. Operations Inspector(S) to fill column (**S - Satisfactory; US - \*Unsatisfactory; N/A-Not applicable**). 2. Airworthiness Inspector to fill column (**S - Satisfactory; US -\*Unsatisfactory; N/A-Not applicable**) for CAR MEL and CAR OPS   ***\*Note: 1.***  *If unsatisfactory, Inspector(s) shall mark the box* ***D,*** *if**Not approved, fill and sign the Deficiency Trackingand Review Checklist (AOC-109), and to send to the operator for corrective action. A signed copy must be retained in Flight Safety for the record with the review number/Version.*  ***\*Note 2****: For reference and guidance Refer to CAR OPS-1 Commercial Air Transportation (Aeroplanes).* |

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| 1. **Organisation/Operator’s Details** | |
| **Organization / Operator’s & Trading Name (If any):** |  |
| **AOC Number:** |  |
| **Accountable Manager:** |  |
| **Address:** |  |
| **Tel.:** | **+968** |
| **Contact person:** |  |
| **Email:** |  |
| **Date:** |  |

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| 1. **Aircraft fleet (Use continuation sheet if required)** |

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| **Aircraft Type** | **Registration** | **Aircraft S/N** | **GNSS** | | **IRS** | | **INS** | |
| **GNSS 1** | **GNSS 2** | **IRS 1** | **IRS 2** | **INS 1** | **INS 2** |
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| 1. **Type of Approval Requested:** | | | | | |
| **Unrestricted NAT HLA** | **YES** | **NO** | **Restricted NAT HLA** | **YES** | **NO** |

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| 1. **Application is based on the following Published Manuals:** | | | |
| **MMEL Revision Number:** |  | **Revision Date:** |  |
| **MEL Revision Number:** |  | **Revision Date:** |  |
| **OM Revision Number:** |  | **Revision Date:** |  |
| **AFM Revision Number:** |  | **Revision Date:** |  |
| **RVSM Approval:** |  | **Revision Date:** |  |
| **ADS-B Approval:** |  | **Revision Date:** |  |
| **PBCS Approval:** |  | **Revision Date:** |  |

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| **CAA**  **reference** | **CAR OPS-1** | **Manual**  **Ref No** | **FOI**  **S/ US/ NA** | **AWI**  **S / US/ NA** | **Required**  **Correction** | **Comments** |
| CAR OPS-1.243 Plus AMC-1 OPS-1.243(1) | Operations in areas with specified navigation performance requirements |  |  |  |  |  |
| CAR OPS-1.653 | GNSS |  |  |  |  |  |
| CAR OPS-1.865 | Communications and Navigation Equipment |  |  |  |  |  |
| CAR OPS-1.870 & AC OPS-1.870 | Additional Navigation equipment required for MNPS airspace (See ICAO Doc 7030 Compliance checklist below) |  |  |  |  |  |
| CAR OPS-1.872 | Equipment required for RVSM airspace |  |  |  |  |  |
| CAR-100 | Safety Management Systems |  |  |  |  |  |
| **ICAO Ref** | **ICAO Doc 7030**  *The below checklist structure is based upon ICAO Doc 7030* | **Manual**  **Ref No** | **FOI**  **S/ US/ NA** | **AWI**  **S / US/ NA** | **Required**  **Correction** | **Comments** |
| NAT 1 | Flight Rules |  |  |  |  |  |
| NAT 2 | Flight plans |  |  |  |  |  |
| NAT 3 | Communications |  |  |  |  |  |
| NAT 4 | Navigation |  |  |  |  |  |
| NAT 5 | Surveillance |  |  |  |  |  |
| NAT 6 | Air Traffic Services |  |  |  |  |  |
| NAT 7 | Safety Monitoring |  |  |  |  |  |
| NAT 8 | Air Traffic Flow Management |  |  |  |  |  |
| NAT 9 | Special Procedures |  |  |  |  |  |
| NAT 10 | Phraseology |  |  |  |  |  |
| NAT 11 | Search and Rescue |  |  |  |  |  |
| NAT 12 | Meteorology |  |  |  |  |  |
| NAT 13 | Aeronautical Information Services (Management) |  |  |  |  |  |

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| **ICAO Ref** | **ICAO Doc 007**  *The below checklist structure is based upon ICAO Doc 007* | **Manual**  **Ref No** | **FOI**  **S/ US/ NA** | **AWI**  **S / US/ NA** | **Required**  **Correction** | **Comments** |
| Chapter 1 | Operational approval and aircraft system requirements for flight in the NAT HLA |  |  |  |  |  |
| Chapter 2 | The Organized Track System (OTS) |  |  |  |  |  |
| Chapter 3 | Other routes and route structures within or adjacent to the NAT HLA |  |  |  |  |  |
| Chapter 4 | Flight Planning |  |  |  |  |  |
| Chapter 5 | Oceanic ATC clearances |  |  |  |  |  |
| Chapter 6 | Communications and position reporting procedures |  |  |  |  |  |
| Chapter 7 | Application of MACH number technique |  |  |  |  |  |
| Chapter 8 | NAT HLA/MNPS flight operation & navigation procedures |  |  |  |  |  |
| Chapter 9 | RVSM flight in the NAT HLA |  |  |  |  |  |
| Chapter 10 | ATS surveillance services in the NAT HLA |  |  |  |  |  |
| Chapter 11 | Monitoring of aircraft systems and crew performance |  |  |  |  |  |
| Chapter 12 | Procedures in the event of navigation system degradation or failure |  |  |  |  |  |
| Chapter 13 | Special procedures for in-flight contingencies |  |  |  |  |  |
| Chapter 14 | Guarding against common areas |  |  |  |  |  |
| Chapter 15 | The prevention of deviations from track as a result of waypoint insertion errors |  |  |  |  |  |
| Chapter 16 | Guidance for dispatchers |  |  |  |  |  |
| Chapter 17 | Flight operations below the NAT HLA |  |  |  |  |  |
| **CAA Reference** | **CAR M & CAR-21** | **Manual**  **Ref No** | **FOI**  **S/ US/ NA** | **AWI**  **S / US/ NA** | **Required**  **Correction** | **Comments** |
| CAR-M.A.301 | Continuing Airworthiness Tasks |  |  |  |  |  |

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| **CAA Reference** | **CAR M & CAR-21** | **Manual**  **Ref No** | **FOI**  **S/ US/ NA** | **AWI**  **S / US/ NA** | **Required**  **Correction** | **Comments** |
| CAR-21.012 | Airworthiness Standards |  |  |  |  |  |

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| 1. **This is to certify that the company manual(s) have addressed all Sultanate of Oman relevant applicable Regulations (CARs) to the proposed operations.** | | |
| **Name of Accountable Manager:** | **Signature:** | **Date:** |
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| **CAA USE ONLY** | | | |
| **Title** | **Name of CAA Inspector** | **Signature** | **Date:** |
| **FOI** |  |  |  |
| **AWI** |  |  |  |

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| **Review No:** | **Results** | ☐ **Approved** | ☐ **Not Approved** |

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| **Chief Operations Section (COS) Name:** | **Signature** | **Date:** |
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