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|  | **FORM**  **FORM: AC-OPS001-3**  **November 2022** |

AIR OPERATOR CERTIFICATION JOB AID AND SCHEDULE OF EVENTS FOR COMMERCIAL AIR TRANSPORT OPERATORS

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| **OFFICIAL NAME OF COMPANY** | | | | | **LOCATION ADDRESS** | | | | | | |
| **MAILING ADDRESS (if different from location)** | | | | | **PRE-CERTIFICATION NUMBER:** | | | | | | |
|  | | | | | **Scheduled Date** | | **Inspector**  **Initial** | **Date**  **Received/ Accomplished** | | **Date Returned for Changes** | **Remarks** |
| **AUTHORITY REFERENCE** | **OPS Insp.** | | **AWI Insp.** | |  | |  |  | |  |  |
|  | I. PRE-APPLICATION PHASE | | | | | | | | | | |
|  | A. Initial Orientation: Inspector: \_\_\_\_\_\_\_\_\_   1. Certification Advisory Circular provided to applicant. 2. Pre-Application Statement of Intent (PASI) Forwarded to the Authority. | | | | |  |  | |  |  |  |
|  | 1. Certification Team Designated (at least one operations, one airworthiness inspector) | | | | |  |  | |  |  |  |
|  | **Name** | | **Speciality** | |
| **CPM** |  | |  | |
|  | 1. Conduct Pre-Application Meeting 2. Verify PASI Information 3. Overview of Certification Process 4. Provide Certification Package   Containing:   1. Job aid and Schedule of events 2. Draft Operations Specifications 3. Other Applicable Publications and Documents 4. Explain Formal Application Submissions | | | | |  |  | |  |  |  |
| **Remarks:** | | | | | | | | | | | |

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| **AUTHORITY Reference** | **II. FORMAL APPLICATION PHASE** | **Scheduled Date** | **Inspector**  **Initial** | **Date**  **Received/ Accomplished** | **Date Returned for Changes** | **Remarks** |
|  | A. Review Applicant’s Submission 1. Formal Application Letter/Form |  |  |  |  |  |
|  | a. Full and Official name (Legal) |  |  |  |  |  |
|  | b. Mailing Address |  |  |  |  |  |
|  | c. Primary Operating Location (Principal Operations/ Maintenance Base) |  |  |  |  |  |
|  | d. Name and address of applicants agent for service |  |  |  |  |  |
|  | e. Key Management Personnel Names |  |  |  |  |  |
|  | 2. Formal Application Attachments |  |  |  |  |  |
|  | a. Job Aid and Schedule of events |  |  |  |  |  |
|  | b. Initial compliance statement |  |  |  |  |  |
|  | c. Company Operations Manuals |  |  |  |  |  |
|  | i. Operations Manual. |  |  |  |  |  |
|  | ii. Maintenance Control Manual |  |  |  |  |  |
|  | iii Aircraft Maintenance Programme |  |  |  |  |  |
|  | d. Initial new hire training curricula (Crewmembers & Flt/Ops/Officers) Company Procedures Indoctrination Emergency Equip Drills Training Initial Flight and Ground Training |  |  |  |  |  |
|  | e. Management and Key Staff qualifications/resumes |  |  |  |  |  |
|  | f. Documents of purchase/ contract(s)/lease(s)/letters of intent |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  | **B.** Evaluation of Authority Resources Based on Job Aid and Schedule of Events |  |  |  |  |  |
| **REMARKS:** | | | | | | |
|  | 1. Formal Application Meeting 1. Schedule of events Date:\_\_\_\_\_\_\_Time:\_\_\_\_\_ 2. Discuss each Submission 3. Resolve Discrepancies/Open Items 4. Review Certification Process 5. Review Impact if Schedule of Events  items are not met |  |  |  |  |  |
|  | **D.**  Issue Letter Accepting/Rejecting Application |  |  |  |  |  |
| **REMARKS:** | | | | | | |

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| **AUTHORITY Reference** | **III. DOCUMENT EVALUATION PHASE** | **Scheduled Date** | **Inspector**  **Initial** | **Date**  **Received/ Accomplished** | **Date Returned for Changes** | **Remarks** |
| REMARKS: | | | | | | |
|  | A. Evaluate Applicable Training Programmes 1. Training Curricula |  |  |  |  |  |
|  | a. Company Procedures Indoctrination |  |  |  |  |  |
|  | b. Emergency Equipment Drills Training |  |  |  |  |  |
|  | c. Ground Training (Handling/Servicing/De-icing) |  |  |  |  |  |
|  | d. Flight Training |  |  |  |  |  |
|  | e. Recurrent Training |  |  |  |  |  |
|  | f. Transition/Upgrade Training |  |  |  |  |  |
|  | g. Differences Training |  |  |  |  |  |
|  | h. Security |  |  |  |  |  |
|  | i. Dangerous Goods |  |  |  |  |  |
|  | j. Flight Examiner/Flight Instructor |  |  |  |  |  |
|  | k. Crew Resource Management |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  | 2. Flt/Ops/Officer Training |  |  |  |  |  |
| **REMARKS:** | | | | | | |
|  | B. Evaluate Management Qualifications 1. Accountable Manager |  |  |  |  |  |
|  | 2. Head of Flight Operations |  |  |  |  |  |
|  | 3. Head of Maintenance |  |  |  |  |  |
|  | 4. Head of Quality |  |  |  |  |  |
|  | a. Quality Manager for Operations (if applicable) |  |  |  |  |  |
|  | b. Quality Manager for Maintenance (if applicable) |  |  |  |  |  |
|  | 5. Chief Pilot |  |  |  |  |  |
|  | 6. Head of Safety |  |  |  |  |  |
|  | 8. Request for Deviation Letter  (If Applicable) |  |  |  |  |  |
|  | 9. Other |  |  |  |  |  |
| **REMARKS:** | | | | | | |

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| **AUTHORITY Reference** | **III. DOCUMENT EVALUATION PHASE (CONTINUED)** | **Scheduled Date** | **Inspector**  **Initial** | **Date**  **Received/ Accomplished** | **Date Returned for Changes** | **Remarks** |
|  | C. Evaluate Operator’s Manual System |  |  |  |  |  |
|  | 1. Completed Operations Manual |  |  |  |  |  |
|  | a. Emergency exit plan |  |  |  |  |  |
|  | b. Carry-on Baggage plan |  |  |  |  |  |
|  | 2. Completed Maintenance Control Manual |  |  |  |  |  |
|  | 3. Authority Approved Aircraft Flight Manual |  |  |  |  |  |
|  | 4. Aircraft Checklists |  |  |  |  |  |
|  | a. Normal |  |  |  |  |  |
|  | b. Abnormal |  |  |  |  |  |
|  | c. Emergency |  |  |  |  |  |
|  | 5. Cabin Attendant Manual |  |  |  |  |  |
|  | 6. Flight Supervision and Monitoring/Flight Following |  |  |  |  |  |
|  | 7. Station/Facility Operations |  |  |  |  |  |
|  | 8. Emergency Response Plan (ERP) |  |  |  |  |  |
|  | 9. Aerodrome Data & En Route Manual (Charts and Plates) |  |  |  |  |  |
|  | 10. Aerodrome/Runway Analysis (Performance) |  |  |  |  |  |
|  | 11. Minimum Equipment List |  |  |  |  |  |
|  | 12. Configuration Deviation List |  |  |  |  |  |
|  | 13. Maintenance Technical Manuals: |  |  |  |  |  |
|  | 14. Fuelling/Refuelling/Defueling |  |  |  |  |  |
|  | 15. Ground Handling Manual |  |  |  |  |  |
|  | 16. Mass and Balance Control Programme |  |  |  |  |  |
|  | 17. Dangerous Goods Manual |  |  |  |  |  |
|  | 18. Security Manual |  |  |  |  |  |
|  | 19. Reliability Programme |  |  |  |  |  |
|  | 20. Completed Continuous Airworthiness Maintenance Programme |  |  |  |  |  |
|  | 21. Passenger Briefing Cards |  |  |  |  |  |
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| **Remarks:** | | | | | | |

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| **AUTHORITY Reference** | **III. DOCUMENT EVALUATION PHASE (CONTINUED)** | **Scheduled Date** | **Inspector**  **Initial** | **Date**  **Received/ Accomplished** | **Date Returned for Changes** | **Remarks** |
|  | D. Other Evaluations 1. Aircraft Lease |  |  |  |  |  |
|  | 2. Maintenance Contracts/Agreements |  |  |  |  |  |
|  | 3. Servicing Contracts/Agreements |  |  |  |  |  |
|  | 4. Exemption/Deviation Requests/Justification |  |  |  |  |  |
|  | 5. Plan for Emergency Evacuation Demonstration |  |  |  |  |  |
|  | 6. Plan for Ditching Demonstration |  |  |  |  |  |
|  | 7. Plan for Demonstration Flight |  |  |  |  |  |
|  | 8. Exit Row Seating Program |  |  |  |  |  |
|  | 9. Initiate Operations Specifications preparation |  |  |  |  |  |
|  | 10. Training Contracts |  |  |  |  |  |
|  | 11. De-icing/Anti Icing |  |  |  |  |  |
|  | 12. Final Statement of Compliance |  |  |  |  |  |
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| **Remarks:** | | | | | | |

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| **AUTHORITY Reference** | **IV. DEMONSTRATION & INSPECTION PHASE** | **Scheduled Date** | **Inspector**  **Initial** | **Date**  **Received/ Accomplished** | **Date Returned for Changes** | **Remarks** |
|  | A. Evaluate Operator Conducting Training 1. Training Facilities |  |  |  |  |  |
|  | 2. Training Schedules: |  |  |  |  |  |
|  | 3. Flight Crewmember Training Evaluation |  |  |  |  |  |
|  | a. Company Procedures Indoctrination |  |  |  |  |  |
|  | b. Emergency Equip. Drills Training |  |  |  |  |  |
|  | c. Ground Training |  |  |  |  |  |
|  | d. Flight Training |  |  |  |  |  |
|  | e. Differences Training |  |  |  |  |  |
|  | 4. Check Pilot/Instructor |  |  |  |  |  |
|  | 5. Cabin Crew |  |  |  |  |  |
|  | a. Company Procedures Indoctrination |  |  |  |  |  |
|  | b. Emergency Equip. Drills Training |  |  |  |  |  |
|  | c. Ground Training |  |  |  |  |  |
|  | 6. Crew Resource Management |  |  |  |  |  |
|  | 7. Flight Supervision and Monitoring/Flight Following |  |  |  |  |  |
|  | 8. Dangerous Goods Training |  |  |  |  |  |
|  | a. Crewmembers |  |  |  |  |  |
|  | b. Ground personnel |  |  |  |  |  |
|  | 9. Security Training |  |  |  |  |  |
|  | 10. Maintenance Training |  |  |  |  |  |
|  | a. Head of Maintenance |  |  |  |  |  |
|  | b. Quality Manager |  |  |  |  |  |
|  | c. Quality system Personnel |  |  |  |  |  |
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| **Remarks:** | | | | | | |

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| **AUTHORITY Reference** | **IV. DEMONSTRATION & INSPECTION PHASE (CONTINUED)** | **Scheduled Date** | **Inspector**  **Initial** | **Date**  **Received/ Accomplished** | **Date Returned for Changes** | **Remarks** |
|  | B. Testing/Certification |  |  |  |  |  |
|  | 1. Pilots |  |  |  |  |  |
|  | 2. Flight Engineers |  |  |  |  |  |
|  | 3. Flt/Ops/Officers |  |  |  |  |  |
|  | 4. Cabin Crew Members |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  | C. Aircraft Conformity Inspection |  |  |  |  |  |
|  | D. Main Operations Base |  |  |  |  |  |
|  | E. Main Maintenance Base |  |  |  |  |  |
|  | F. Station/Facilities (Operations) |  |  |  |  |  |
|  | G. Station/Facilities (Maintenance) |  |  |  |  |  |
|  | H. Flight Supervision and Monitoring/Flight Following |  |  |  |  |  |
|  | I. Recordkeeping Locations |  |  |  |  |  |
|  | 1. Crewmember |  |  |  |  |  |
|  | a. Training |  |  |  |  |  |
|  | b. Flight & rest Times |  |  |  |  |  |
|  | c. Qualification |  |  |  |  |  |
|  | 2. Maintenance |  |  |  |  |  |
|  | a. Aircraft Records |  |  |  |  |  |
|  | b. Maintenance Personnel Training |  |  |  |  |  |
|  | i Head of Maintenance |  |  |  |  |  |
|  | ii Head of Quality and staff |  |  |  |  |  |
|  | iii Contract Employees |  |  |  |  |  |
|  | J. Flight/Trip Records |  |  |  |  |  |
|  | K. Emergency Evacuation Demonstration |  |  |  |  |  |
|  | L. Ditching Demonstration |  |  |  |  |  |
|  | M. Demonstration Flight Evaluation |  |  |  |  |  |
|  | N. Air Service License |  |  |  |  |  |
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| **Remarks:** | | | | | | |

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| **AUTHORITY Reference** | **V. CERTIFICATION PHASE** | **Scheduled Date** | **Inspector**  **Initial** | **Date**  **Received/ Accomplished** | **Date Returned for Changes** | **Remarks** |
|  | A. Approve Operations Specifications |  |  |  |  |  |
|  | **B.** Present Certificate & Operations Specifications |  |  |  |  |  |
| **Remarks:** | | | | | | |
|  | C. Prepare Certification Report |  |  |  |  |  |
|  | 1. Assemble Report |  |  |  |  |  |
|  | a. Formal Application Letter and PASI |  |  |  |  |  |
|  | b. Final Statement of Compliance |  |  |  |  |  |
|  | c. Copy of Operations Specifications |  |  |  |  |  |
|  | d. Copy of Certificate |  |  |  |  |  |
|  | e. Summary of Difficulties |  |  |  |  |  |
|  | 2. Distribute Report |  |  |  |  |  |
| **Remarks:** | | | | | | |
|  | D. Develop Post Certification Surveillance Programme |  |  |  |  |  |
|  | 1. Within Geographic Area |  |  |  |  |  |
|  | 2. Outside Geographic Area |  |  |  |  |  |
| **Remarks:** | | | | | | |