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|  | FORM  FORM: AC-OPS018  November 2022 |

**APPROVED SINGLE-ENGINE TURBINE POWERED AIRCRAFT (ASETPA) – APPLICATION AND ASSESSMENT FOR OPERATIONS AT NIGHT OR IN IMC**

This form contains the process and information for the Application, Assessment and Approval for Single-engine Turbine Powered Aircraft operations at night or in IMC. The form can be used for multiple aircraft of the same model only. For multiple models multiple forms are to be completed.

Completion and submission of this form by the applicant constitutes a request to operate a single engine turbine powered aircraft under night or in IMC conditions. Reference should be made to guidance material CAA-AC-OPS018.

**PART A – Applicant Details**

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| **Operators Name:** |  |
| **Operators AOC number:** |  |
| **Applicants Contact Details:**  **Phone:**  **Email/s:**  **Mobile:**  **Address:** |  |

**PART B – Aircraft Details**

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| **Aircraft Registration** | **Aircraft Type/Model Designation** | **Aircraft Serial Number** | **Manufacturer** | **Engine Type/Model** | **Propeller** | **Type Certificate No.** |
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**Comments/Additional information:**

**PART C – Application Action Items**

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| **Flight Operations Documents** | **Document reference (*To be filled by Applicant*)** | **CAA Inspector comment** |
| 1. Emergency Procedures – QRH Document and Operations Manual Emergency Section. |  |  |
| 2. Routes and route limitations shows compliance for each proposed route. |  |  |
| 3. Procedures for the use of other than automatic engine ignition systems. |  |  |
| 4. Procedures in the event of chip detector warning. |  |  |
| 5. Procedures in the event of fire |  |  |
| 6. Procedures in the event of engine failure including descent to a forced landing in night or IMC conditions |  |  |
| 7. MEL and MEL procedures(must include equipment required for night or IMC operations) |  |  |
| 8. Flight crew qualifications, ratings and experience ( Pilot training file ) |  |  |
| 9.Flight crew initial and recurrent training ( Pilot training file - appropriate to night or IMC operations) |  |  |
| 10. Procedures in the event of pilot recognizing engine performance parameter have been exceeded. |  |  |
| 11. Operations manual Part B(for specific type) |  |  |
| 12. On-site inspection of manuals and training records |  |  |
| ***CAA Official use only*** | | |

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| **Airworthiness Documents** | **Requirement** | **Action (*To be filled by applicant*)** | **CAA Inspector comment** |
| 1. Certificate of Registration | Attach Copy | Yes ☐ |  |
| 2. Certificate of Airworthiness | Attach Copy | Yes ☐ |  |
| 3. MEL with specific ASETPA items. | Attach Copy | Yes ☐ |  |
| 4. AMP and MCM | Attach Copy | Yes ☐ |  |
| 5. Turbine Engine Reliability | Attach Copy | Yes ☐ |  |
| 6. Engine trend monitoring data interpretation process. | Attach Copy | Yes ☐ |  |
| 7. Avionics equipment List. | Attach Copy | Yes ☐ |  |
| 8. Approved Flight Manual (POH) revision status | Attach Copy | Yes ☐ |  |
| 9. 12**.** Engine Type  1. Pratt & Whitney Canada PT6A-114,114A, 67 B, 64 and 42A.  • Or if other contact Manufacturer to determine engine applicability for ASETPA operations. | Attach Copy | Yes ☐ |  |
| ***CAA Official use only*** | | | |

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| **Aircraft Equipment** | **Action (*To be filled by applicant*)** | **CAA Inspector (AWI) comment** |
| 1. Engine Ignition system.  • Auto or Manual | Yes ☐ |  |
| 2. Power source  • Two separate electrical generating systems. Each capable of supplying all probable combinations of continuous in-flight electrical loads at night or in IMC | Yes ☐ |  |
| 3. Emergency electrical supply system | Yes ☐ |  |
| 4. Radio altimeter | Yes ☐ |  |
| 5. Engine electronic magnetic particle detection system.  • The aeroplane must be equipped with an electronic engine particle detection system which provides the pilot with an in-flight, visual caution warning.  • Compliance can be met by either magnetic plug chip detector (MCD) or oil debris monitoring system.  • For PT6A engines incorporating MCD’s, two chip detectors are required. | Yes ☐ |  |
| 6. Engine compartment fire detection system.  • For the purpose of ASETPA type approval; “Approved” shall mean compliance with an applicable TSO, or included in the type certification of the aeroplane, or as otherwise approved by UCAA. | Yes ☐ |  |

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| 7. Engine start  The requirement for two engine start may be reduced to one engine start, provided: | **Action (*To be filled by applicant*)** | **CAA Inspector comment** |
| a. The aeroplane’s engine fuel feed system from the aeroplane’s fuel tank(s) to the engine fuel control unit is automatic, and | Yes ☐ |  |
| b. The engine compressor air intake incorporates continuous anti-icing whilst the engine is operating, and | Yes ☐ |  |
| c. The aeroplane incorporates an engine ignition system which activates in the event of a loss of an engine parameter such as engine speed, turbine temperature or engine torque. | Yes ☐ |  |
| 8. Electrical Load shedding.  • The airplane flight manual or approved equivalent shall provide the pilot with a procedure for shedding non-essential electrical systems during maximum glide range. | Yes ☐ |  |
| 9. Flight instruments  • The aeroplane type must be equipped with flight and navigation instruments complying with Ugandan regulatory requirements for commercial passenger carrying IFR operations. | Yes ☐ |  |
| 10. Global Navigation Satellite System.  • Must be equipped with an IFR approved GNSS system. | Yes ☐ |  |
| 11. Autopilot.  • For single pilot operations, the aeroplane type must be equipped with an approved automatic pilot complying with UCARs | Yes ☐ |  |
| 12. Weather Radar  • The aeroplane type shall be equipped with a weather radar system acceptable to UCAA | Yes ☐ |  |
| 13. Supplementary oxygen. (As required) | Yes ☐ |  |
| 14. Passenger seats compliant with UCARS. | Yes ☐ |  |
| 15. Two attitude indicators powered from independent sources. | Yes ☐ |  |
| 16. Landing light with independent of landing gear capable of adequately illuminating touchdown area in a night forced landing. | Yes ☐ |  |
| ***CAA Official use only*** | | |

**PART D – Applicants Declaration**

1. I declare that the information provided on this form is true and correct.
2. I declare that the aircraft is in a condition for safe operation, has no uncertified modifications or repairs and continues to meet the applicable design requirements.

Name:

Signature:

***UCAA USE ONLY***

**PART E – Application Recommendation/Approval Items**

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| **Airworthiness Inspector Overall Comments:** | | |
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| **Flight Ops Inspector Overall Comments:** | | |
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| **Subject** | **Name & Signature** | **Date** |
| Airworthiness Approval Recommended. |  |  |
| Flight Ops Inspector Approval Recommended. |  |  |
| MFSS Approval |  |  |
| **Name of Inspector (CPM/FOI) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | | |