**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/ICAO Code | Steep Approach Runways | Glideslop Angles |
| 2. |  |  |  |
| 3. |  |  |  |
| 4. |  |  |  |
| 5. |  |  |  |
| 6. |  |  |  |
| 7. |  |  |  |
| 8. |  |  |  |
| 9. |  |  |  |
| 10. |  |  |  |

| **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 steep approach approval/ if applicable |  |  |
| 3. | OM Part A |  |  |
| 4. | OM Part B |  |  |
| 5. | OM Part C |  |  |
| 6. | OM Part D |  |  |
| 7. | Training records- line training and sim programs and record forms, airport briefing forms |  |  |
| 8. | MEL (if applicable) |  |  |
| 9. | Operational Risk Analysis |  |  |
| 10. | Compliance Checklist PART- SPA\_STA |  |  |

| **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 MEL to reflect system requirements  (e.g. redundancy levels) appropriate to the intended EFB operations.  Minimum Equipment List revised? | |  |  |

|  |  |  |
| --- | --- | --- |
| **VI.\*** | **ТЕХНИЧЕСКО ОБСЛУЖВАНЕ / *Maintenance*** | |
| **Maintenance Practices and Procedures (\*)** | | |
| The applicant must institute procedures in respect of continuing airworthiness practices for Steep Approach.  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. | Maintenance of equipment (adherence to manufacturer’s maintenance instructions, modification procedures, repair procedures, system calibration policy, maintenance practices of systems related to steep approach, handling of on-board systems, etc.). |  |
| 2. | Action for non-compliant aircraft (downgrading, technical log entries, corrective actions, placarding, upgrading, release to service procedures, monitoring and reporting of repetitive defects, reliability reporting, reporting to the BG CAA, etc.). |  |
| 3. | Maintenance training (initial training and recurrent training of applicant’s maintenance management staff and contractor’s maintenance personnel, training syllabi qualification of maintenance personnel, etc.). |  |
| 4. | Test equipment (use of test equipment, handling, calibration, etc.). |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **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\_STA 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\_STA 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.