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Operators applying for authorization to operate within Special Operations Area (SOA) , North Atlantic Minimum Navigation Performance Specification (NAT MNPS) , RVSM Airspace, and RNP/BRNAV shall comply with the following guidance.


Since we are unfamiliar with the extent of your company, the FAA New York International Field Office will require the following information. In consideration we are pleased to provide reference to all guidance available for this project. Enclosed is an Operator Data Report that you need to complete and return to this office. In addition, the following items need to be obtained and some additional information provided to this office before issuance of a [FAR Part 91](#) Operations Safety Specifications (OPSS 91J) for operation in SOA.

- Please provide a letter of request for the Special Area's of Operation in which you seek authorization. **This letter must contain the name and the address of the Company/Operator who is applying for the special authorizations** in addition to the US Agent for service.

- Obtain and understand the applicable FAA Advisory Circulars the requirements of FAR 91.705 and Appendix G apply. http://www.faa.gov/ats/ato/rvsm_documentation.htm. An operators RVSM manual must be developed, containing the international operating procedures for RVSM/MNPS/RNP/BRNAV and the airworthiness inspection requirements for RVSM equipment and instructions for continued airworthiness. **The manual must contain a Table of Contents and a List of Effective Pages.** The airworthiness section of the manual should contain information for maintenance and inspection of RVSM equipment and systems, Periodic inspections, and a quality assurance system or method, which ensures continued accuracy and reliability of the RVSM systems. And procedures for returning the aircraft RVSM system to service following repairs.

- Provide this office with written proof of plotted waypoints as confirmation of the aircraft's navigation accuracy.
How to perform this functional flight check is documented in AC 91-49: General Aviation Procedures for Flight in North Atlantic Minimum Navigation Performance Specifications Airspace.

- Provide this office with copies of applicable STC's and FAA Form 337's associated with the equipment you list on the enclosed form.

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- Provide the inspection intervals (Frequency) of the RVSM equipment and related systems as identified in the manufactures Service Bulletin and or Inspection Program. Please provide copies of the reference task cards or procedures.
- Provide this office with a copy of the page in the Airplane Flight Manual (AFM) or Supplement (AFMS) which shows that the aircraft qualifies for NAT MNPS Oceanic Operations and/or RVSM.
- For the pilots operating under this LOA, provide this office with copies of their pilot certificates and training certificates acknowledging the NAT MNPS / RVSM training they received relating to over water navigation.
- For international operations please provide a copy of each pilots FCC Radio Operators Permit
- Your manual should contain a description of the checklist and crew operating procedures, including a blank navigation log sheet, which will be used to ensure accurate navigation. A type of navigation log, as you know, is required by ICAO for any aircraft engaged in international navigation.
- If the operator is currently authorized to utilize the Master Minimum Equipment List (MMEL) then a copy of their Letter of Authorization must be provided. If the operator does not currently hold an LOA for the use of the MMEL as permitted by [FAR 91.213](#), then a separate letter of request should also be submitted to the NY IFO at this time.
- Provide this office with a copy of the Height Monitoring result (HMU) as recorded by Euro-Control User support cell.
- Complete the “RVSM/MNPS Worksheet & Operators Data Sheet” (Attachment) and include proof of US citizenship for Agent.

Granting of an LOA or Operations Specifications for NAT MNPS / RVSM operations, with or without limitations, can only be accomplished after acceptable and successful completion of the above mentioned items. Please contact this office either by telephone, e-mail, or via facsimile with any questions you may have. Our office hours are 7:30 a.m. to 4:00 p.m. EST., Monday through Friday.



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MNPS / RVSM WORK SHEET

Aircraft Make / Model /Series: _____ Serial No. _____

Aircraft Registration Number (N-Number): _____

Aircraft Color: _____

Airworthiness Approval Date: _____
(Date work completed to comply with appropriate airworthiness document [e.g. SB, STC, aircraft service change; **Please supply copy**])

Mode S code: _____ Operating Rule Utilized: FAR 91 _____

Type of Aircraft Inspection Program: _____

Aircraft Location: _____ Base of Operations: _____

Name of Aircraft Owner/Operator: _____

Crew training conducted by: _____

Printed name of person responsible for crew operations or agent for service:


Signature of person responsible for crew operations or agent for service
(**must be a U.S. citizen**): _____

Printed name of person responsible for maintenance: _____

Signature of person responsible for maintenance: _____

Phone number of local contact: _____

Street address (cannot be a Post Office Box): _____

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City, state, zip code: _____

Operator Compliance Statement: The above listed aircraft has been properly modified, if necessary, to meet the requirements for conducting operations in airspace where North Atlantic Minimum Navigation Performance Specifications (MNPS) / RVSM apply. It has been determined that the required equipment has been installed (in accordance with approved data) and appropriate aircraft records have been completed to reflect the installation of this equipment. The aircraft equipment list and weight and balance have been updated. All aircraft records concerning equipment installations and aircraft inspections will be available if a conformity inspection is to be accomplished by an FAA Inspector.

Printed Name and Title: _____



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OPERATOR DATA SHEET

Name & Address:

Aircraft make and model:

N-Number:

Aircraft serial number:

Aircraft color:

NAVIGATION EQUIPMENT

**QTY MANUFACTURER MODEL NUMBER
DESCRIPTION**



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COMMUNICATION EQUIPMENT

**QTY MANUFACTURER MODEL NUMBER
DESCRIPTION**

RVSM EQUIPMENT

***QTY* *MANUFACTURER* *MODEL NUMBER*
*DESCRIPTION***

Aircraft base of operations (city, state, zip):

Name of aircraft owner/operator:


Crew training conducted by:

**Print name of person responsible for crew operations or agent for
service (must be a U.S. citizen):**

**Signature of person responsible for crew operations or agent for
service: _____**

Street address (cannot be a Post Office box):

City, state, zip code:

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FOR FAA USE ONLY (To be completed by issuing office)

This approval is for: MNPS

MNPS and RVSM

Authorization Number: -XXXXXXXX

Aircraft limitations (if applicable):

Program Tracking and Reporting Subsystem (PTRS) tracking number:

XXXXXXXXXXXXXX

Date of Issuance: XXXXXXXXXXX

Expiration Date:

XXXXXXXXXXXXXX

/This authorization is subject to the conditions that all operations conducted within NAT MNPS / RVSM airspace are in accordance with [FAR 91.705](#), [FAR 91.706](#), and the flight rules contained in International Civil Aviation Organization (ICAO) Annex 2, and that all operations outside of the United State comply with [FAR 91.703](#) and Annex 2. The person responsible for crew operations or agent for service must accept responsibility for complying with the stated regulations by signing this document. **This document is considered invalid until signed.** If the person signing this document relinquishes responsibility, changes mailing address, or the aircraft changes ownership or base of operation, this letter becomes invalid and the signee should immediately notify the issuing office of the change. LOA's can be renewed via a letter or fax request submitted at least 30 days prior to the expiration date if no changes have been made. **If any changes have been made, application for a new LOA must be made in the same manner as that required for the initial LOA.**

Manager

SAMPLE