

**U.S. DEPARTMENT OF TRANSPORTATION  
FEDERAL AVIATION ADMINISTRATION -- FLIGHT STANDARDS SERVICE  
SPECIAL INSTRUMENT APPROACH PROCEDURE -- FLIGHT STANDARDS SERVICE**

Bearings, headings, courses, and radials are magnetic. Elevations and altitudes are in feet, MSL, except HAT, HAA, TCH, and RA. Altitudes are minimum altitudes unless otherwise indicated. Ceilings are in feet above airport elevation. Distances are in nautical miles unless otherwise indicated, except visibilities which are in statute miles or in feet RVR.

If an instrument approach procedure of the above type is conducted at the below named airport, it shall be conducted in accordance with a charted instrument approach procedure predicated on the specifications contained herein and as specified on accompanying FAA form 8260-10, unless an approach is conducted in accordance with a different procedure for such airport authorized by AFS-400. Minimum altitudes shall correspond with those established for en route operation in the particular area or as set forth below.

**SPECIFICATION - NOT FOR COCKPIT USE**

TERMINAL ROUTES				MISSED APPROACH
FROM	TO	COURSE AND DISTANCE	ALTITUDE	MAP:

1. PT ____ SIDE OF COURSE _____ OUTBOUND _____ FT WITHIN ____ MILES OF _____ (IAF)	ADDITIONAL FLIGHT DATA:
2. _____	
3. FAC: _____ FAF: _____ DIST FAF TO MAP: _____ THLD: _____	
4. MIN. ALT: _____	
5. DIST TO THLD FROM OM: _____ MM: _____ IM: _____ 100 HAT: _____ GS ANT: _____	
6. MIN GS INCPT: _____ GS ALT AT: _____ OM: _____ MM: _____ IM: _____	
7. GS ANGLE: _____ TCH: _____	
8. MSA FROM: _____	
MAG VAR: _____ EPOCH YEAR: _____	

MINIMUMS															
TAKEOFF: SEE FAA FORM 8260-15A FOR THIS AIRPORT	ALTERNATE: N A														
CATEGORY =====>	A			B			C			D			E		
	DA/MDA	VIS	HAT/HAA	DA/MDA	VIS	HAT/HAA	DA/MDA	VIS	HAT/HAA	DA/MDA	VIS	HAT/HAA	DA/MDA	VIS	HAT/HAA

NOTES:

CITY AND STATE	ELEVATION: _____ TDZE: _____	FACILITY IDENTIFIER: _____	PROCEDURE NO. / AMDT NO. / EFFECTIVE DATE: _____	SUP: _____
	AIRPORT NAME: _____			AMDT: _____
				DATED: _____

NOTES CONTINUED:

AIR CARRIER NOTES:

The procedure on the other side and the foregoing data are hereby:

SUBMITTED BY

NAME:	COMPANY	DATE:
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FLIGHT CHECKED BY

NAME:	FIFO	DATE:
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DEVELOPED BY

NAME:	NFPG	DATE:
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RECOMMENDED BY

NAME:	MANAGER	NFPG	DATE:
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APPROVED BY

NAME:	AFS-400	DATE:
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This Special Instrument Approach Procedure shall be conducted in accordance with the instructions specified on the reverse side of this form and the operator's minima as specified in appropriate Letter of Authorization or operations/management specifications. This procedure contains no proprietary information and may be issued to additional users if they are found to meet all criteria and requirements set forth and have been approved by the FAA.

DATE: \_\_\_\_\_ RECEIVED FOR THE OPERATOR BY: \_\_\_\_\_ TITLE: \_\_\_\_\_  
SIGNATURE

BY DIRECTION OF THE ADMINISTRATOR \_\_\_\_\_  
SIGNATURE TITLE

EFFECTIVE DATE: \_\_\_\_\_