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| --- | --- | --- | --- |
| Operator’s Details | | | |
| Operator: - |  | Aircraft Type |  | |
| AOC No.: |  | Aircraft Registration: |  | |
| Date: |  | Location/Route: |  |
| Contact Person Title/Name: |  | Phone No: - |  |
| Email: |  |  |  |

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| 1. **Proving Flight Test** |
| **Note: S - Satisfactory U/S - Unsatisfactory (\*) - As applicable**  The Demonstrations/Proving Flight Test is conducted for new AOC certification and for the induction of a new aircraft type or new operations into an Operator’s AOC and Operations Specifications. |

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| **No.** | **CAR Ref** | **2.1 Application and Documents** | **Dept** | **S /US** | **Comments/ Findings** |
|  | CAR OPS 1.175 (b) 3.175 | Letter of Proving Test request and readiness is sent to the Director of Flight Safety (DFS) at least thirty (30) days prior to the proposed Proving Test date. | DFS |  |  |
| Coordination meeting is required between the CAA Principal Inspectors (i.e. Flight Operations, Airworthiness, Cabin, Security) and the Operator. | **ALL** |  |  |
|  | CAR OPS  1.185 (d) | Temporary flight clearance shall be presented to the operator once the  PFOI is satisfied that all documentations, manuals and arrangements are fulfilled.  Notwithstanding the en-route, over-flight, landing and departure clearances from the relevant Authorities are met.  ***Note:***  *Ops Specs may be amended to add the new aircraft by an asterisk annotation (\*) or by issuing a Letter of Authorization to operate in a Special Area of Operation.* | **ALL** |  |  |

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| **No.** | **CAR Ref** | **2.2 Application and Documents** | **Dept** | **S /US** | **Comments/ Findings** |
|  | CAR OPS 1.905 | The maintenance program for the new aircraft type must be submitted to and approved by the Airworthiness section. | **AWI** |  |  |
|  | CAR-21 and CAR-145 | Final Acceptance (Issuance of C of A) | **AWI** |  |  |
| 1. External Inspection |  |  |  |
| 1. Ground Tests |  |  |  |
| 1. Flight Test |  |  |  |
| 1. Technical Acceptance |  |  |  |
| 1. C of A Issuance |  |  |  |
| **No.** | **CAR Ref** | **2.3 Application and Documents** | **Dept** | **S /US** | **Comments/ Findings** |
|  | CAR OPS  1.180 (c)  DFS 16.5 | Prior to the first revenue flight, proving flight(s) should be conducted to demonstrate the ability of the operator to safely operate the new aircraft type on a day to day basis. The applicant should submit a formal proving flight plan which contains: |  |  |  |
|  | 1. Details of the Operator/ company coordinator |  |  |  |
|  | 1. Detailed schedule of all proposed flights |  |  |  |
|  | 1. List of names and positions of flight crewmembers on each flight. |  |  |  |
|  | 1. Names, titles and company affiliation of all non- crewmembers on each flight |  |  |  |
|  | 1. Applicants plan for reducing test hours\* |  |  |  |
| **No.** | **CAR Ref** | **2.4 Application and Documents** | **Dept** | **S /US** | **Comments/ Findings** |
|  |  | The CAA team should review the following:   1. Proving Flight plan for regulatory compliance, safe operating practices, logic of sequence, etc. | ALL |  |  |
|  |  | 1. Operational and Training Manual | FOI  CSI |  |  |
| 1. Operations Manual (OM) |  |  |  |
| **No.** | **CAR Ref** | **(Contd.)**  **2.4 Application and Documents** | **Dept** | **S /US** | **Comments/ Findings** |
|  |  | 1. Maintenance Manual |  |  |  |
| 1. Cockpit Normal/ Abnormal/ Emergency Checklists and Procedures, Crew co-ordination (Normal/ Abnormal/ Emergency) |  |  |  |
| 1. Cabin Safety and Emergency Manual |  |  |  |
| 1. Emergency Response Plan |  |  |  |
| 1. Passenger Safety Briefing Cards |  |  |  |
| 1. Aircraft Fuelling |  |  |  |
| 1. Dispatch/ Flight Following/Flight Locating |  |  |  |
| 1. Weight and Balance |  |  |  |
| 1. Dangerous Goods |  |  |  |
| 1. MEL/CD |  |  |  |
| 1. Flight Planning |  |  |  |
| 1. De-icing/ Anti-Icing |  |  |  |
| 1. Carry-On Baggage |  |  |  |
| 1. Exit Seating |  |  |  |
| 1. Cargo handling and loading manuals |  |  |  |
| 1. Ground Operations Manual |  |  |  |
| 1. Enhanced Weather Information Systems |  |  |  |
|  |  | 1. **Training Manuals, Programmes, and Records\* for:**    1. Flight crew | FOI  CSI |  |  |
|  |  | * 1. Cabin Crew |  |  |  |
|  |  | * 1. Dispatch/Flight Following/Flight Locating |  |  |  |
|  |  | * 1. Maintenance Personnel |  |  |  |
|  |  | * 1. Ground Personnel (handling, loading, Mass and Balance, etc.) |  |  |  |

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| **No.** | **CAR Ref** | **2.5 Application and Documents** | **Dept** | **S /US** | **Comments/ Findings** |
| 9. |  | The proving flight(s) should cover the followings:   1. Flight Planning by Dispatcher & Flight Crew |  |  |  |
| 1. Dispatcher Briefing |  |  |  |
| 1. Flight Crew Briefing |  |  |  |
| 10. | CAR OPS 1.300 | **Flight Plan**   1. Submission of ATS Flight Plan | FOI |  |  |
| 1. Operational Flight Plan |  |  |
| 11. | CAR OPS 1.290 | **Dispatch Control - Flight Release Considerations**   1. MEL/CDL |  |  |  |
| 1. Forecast & En-route Weather |  |  |  |
| 1. Fuel |  |  |  |
| 1. Dispatch Weather Minima |  |  |  |
| 1. Operational documentation |  |  |  |
| 12. | CAR OPS 1 Subparts N & O | **Qualification & Currency** |  |  |  |
| 1. Flight Crew |  |  |  |
| 1. Cabin Crew |  |  |  |
| 13. | CAR OPS 1.290 | **Fuel and Oil Supply** |  |  |  |
| 1. Standard operational rules |  |  |  |
| 1. Fuel policy |  |  |  |
| 1. Critical fuel reserve |  |  |  |
| 1. Critical fuel scenario |  |  |  |
| 14. | CAR OPS Subpart L | **Communication & Navigation** | FOI  AWI |  |  |
| 15. | CAR OPS 1.290 | **Departure/ En-route/ Destination Alternates** | FOI |  |  |
| * 1. Suitable/Adequate Alternate Aerodrome |  |  |
| 16. | CAR OPS 1.475  /1.485/1.530 | **Performance Data** | FOI |  |  |
| 17. | **Operational Limitations**   1. Area of Operation | FOI  FOI |  |  |
| 1. Flight Release Limitation |  |  |
| 1. Contingency Procedures |  |  |
| **No.** | **CAR Ref** | **2.5 Application and Documents** | **Dept** | **S /US** | **Comments/ Findings** |
| 18. | CAR OPS 1.085 &  Subpart P | **Pre-Flight Briefing**   1. Flight Crew | FOI CSI  FOI CSI |  |  |
| 1. Cabin Crew |  |  |
| 19.. | Emergency Evacuation and/or Ditching Demonstration\* |  |  |
| 20. | CAR OPS 1 & 3 Subpart P | **In-flight Normal Procedures** | FOI CSI |  |  |
| 21. | CAR OPS 1 & 3 Subpart P | **In- flight Abnormal Procedures (Simulated Scenario) Flight Crew** | FOI |  |  |
| 1. Loss of One Critical Component |  |  |
| 1. System Failure |  |  |
| 1. Power plant related Failure etc. |  |  |
| 22. | CAR OPS 1 & 3 Subpart P | **In- flight Abnormal Procedures (Simulated Scenario) Cabin Crew** | CSI |  |  |
| 1. Galley/ Cabin Fire/ Smoke |  |  |
| 1. Medical cases |  |  |
| 1. Rapid Cabin Decompression |  |  |
| 1. Prepared/Unprepared Ditching/ Crash Landing etc. |  |  |
| 23. | CAR OPS  1.195 | **Flight Watch/ Monitoring** | FOI |  |  |
| 1. System |  |  |
| 1. Effectiveness |  |  |
| 24. | CAR OPS  1.297 | En-route Facilities & Weather update | FOI |  |  |
| 25. | OMA | Crew Post Flight Actions | FOI |  |  |
| 26. | DFS | In addition to the manual inspections and approvals outlined above, the following inspections should be conducted:   1. Inspections of each transit or line station must be conducted (if required as for Air Carrier) to ensure that ground personnel are adequately trained to support the new aircraft type and that support equipment and facilities are adequate for the operation.   Transit stations may be inspected during proving flights or as separate events prior to the first revenue flight. | FOI AWI |  |  |

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| **No.** | **CAR Ref** | **2.6 Application and Documents** | **Dept** | **S /US** | **Comments/ Findings** |
| 27. | CAR OPS  1.175  &  1.290 | 2. The Dispatch/ Operational Control center should be inspected to ensure adequacy of flight planning, briefing and record-keeping. | FOI |  |  |
| **No.** | **CAR Ref** | **2.7 Application and Documents** | **Dept** | **S/US** | **Comments/ Findings** |
| 28. | CAR OPS 1.175 | In conjunction with AOC/POC approval, the issuance/ amendment of the Operations Specifications represents a formal approval for the operator to commence revenue operations with the new aircraft type or within a Special Area of Operation. |  |  |  |
| 1. **Observations** | | | | | |
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| 1. **Recommendations** | | | | | |
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| **Result: - Satisfactory ☐** | **Unsatisfactory □** |

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| **CAA Use Only** | | |
| **Follow up required** | **YES** | **NO** |

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| --- | --- | --- | --- |
| **Title** | **CAA Inspector’s Name** | **Signature** | **Date:** |
| **FOI** |  |  |  |
| **AWI** |  |  |  |
| **CSI** |  |  |  |

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| --- | --- | --- |
| **Director Flight Safety Name** | **Signature** | **Date:** |
|  |  |  |

***Note: All deficiencies are to be recorded on AOC-109 and passed to the operator for rectification and provision of the revised documentation.***