



# AUTORIDADE NACIONAL DA AVIAÇÃO CIVIL

Direção de Operações de Voo  
Departamento De Transporte Aéreo  
REQUERIMENTO APROVAÇÃO SPA LVO  
REGULAMENTO (UE) 965/2012

<b>OPERADOR:</b> <i>Operator</i>		<b>COA:</b> <i>AOC</i>		<b>PT-</b> /
<b>Aprovação Inicial</b> <input type="checkbox"/> <i>Initial Approval</i>		<b>Alteração</b> <input type="checkbox"/> <i>Change</i>		<b>Declaração /</b> <i>Data:</i>
<b>Âmbitos</b> <i>Scopes</i>		<input type="checkbox"/> CAT / <input type="checkbox"/> NCC / <input type="checkbox"/> SPO / <input type="checkbox"/> ORO.AOC.125		
<b>AERONAVE</b> <i>Aircraft</i>	<b>Marca:</b> <i>Maker:</i>			
	<b>Modelo:</b> <i>Model</i>			
	<b>Reg.(s):</b> <i>Registr.:</i>			
	<b>S/N (s):</b>			
<b>Manual de Operações, EDIÇÃO</b> <i>Operations manual , Edition/Issue</i>		<input type="checkbox"/> :	<b>REVISÃO</b> <i>Revision</i>	<input type="checkbox"/> :
<b>Min. Equip. List - MEL, EDIÇÃO</b> <i>Min. Equip. List - MEL Edition/Issue</i>		<input type="checkbox"/> :	<b>REVISÃO</b> <i>Revision</i>	<input type="checkbox"/> :

This form can be filled in on screen (preferred method) then printed, signed and submitted as instructed. Alternatively, print, then complete in BLOCK CAPITALS using black or dark blue ink.

## 1. Type of Application- must be completed for any application to be processed.

<b>a) Please confirm:</b>	
As an Operator, is this an 'Initial' Application	YES <input type="checkbox"/> / NO <input type="checkbox"/>
It is an extension to existing approval and fleet.	YES <input type="checkbox"/> / NO <input type="checkbox"/>
Is an approval extension to another fleet.	YES <input type="checkbox"/> / NO <input type="checkbox"/>
A risk assessment / management of change is included	YES <input type="checkbox"/> / NO <input type="checkbox"/>
<b>b) Please confirm approval category:</b>	
<b>CAT I LTS-</b> RVR: ____m / DH: ____ ft , 450 m if ILS is Class I/T/1)	YES <input type="checkbox"/> / NO <input type="checkbox"/>
<b>CAT II –</b> RVR: 300m / DH: 100 ft	YES <input type="checkbox"/> / NO <input type="checkbox"/>
<b>CAT II OTS-</b> RVR ____m /DH: ____ ft	YES <input type="checkbox"/> / NO <input type="checkbox"/>
<b>CAT IIIA –</b> RVR: 200m / DH: 50 ft	YES <input type="checkbox"/> / NO <input type="checkbox"/>
<b>CAT IIIB –</b> RVR:125m / DH: __ft (less than 50)	YES <input type="checkbox"/> / NO <input type="checkbox"/>
<b>CAT IIIB –</b> RVR: 75m / No DH	YES <input type="checkbox"/> / NO <input type="checkbox"/>
<b>LVTO RVR:</b> ____ m	YES <input type="checkbox"/> / NO <input type="checkbox"/>
<b>Use of HUD/HUDLS/EVS</b>	YES <input type="checkbox"/> / NO <input type="checkbox"/>



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### 2. List of Documents for Requirements Reference

#	OM Reference or Document Reference
1	OM Part A,
2	OM Part B,
3	OM Part C,
4	OM Part D,
5	MEL,
6	AFM,
7	
8	
9	
10	

### 3. Requirements

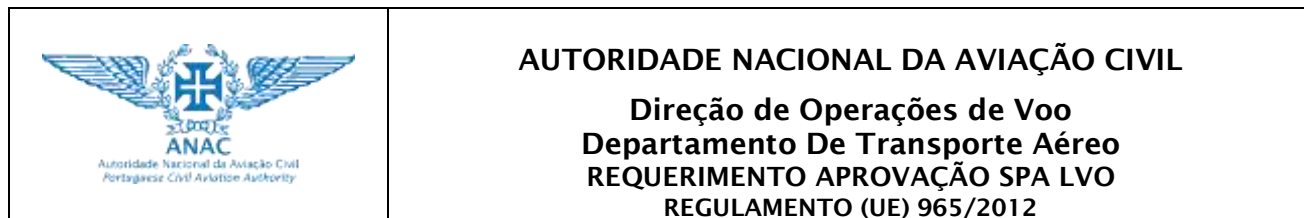
Requirements	Subjects	OM Reference or Document Reference
<b>Example</b>	<b>Example to fill Reference, based on table above</b>	<b>#1, section 4.5, page 445</b>
EU Reg 965/2012 Subpart E SPA.GEN.105, 110,115,120	Air OPS SPA.LVO and ICAO Doc. 9365 (where appropriate) have been satisfied. What type of approval, e.g. CAT II or III, low visibility	
AMC1 SPA.LVO.105 AMC2 SPA.LVO.105 GM1 SPA.LVO.100 (c),(e)	Operational demonstration Requirements given in Air Ops AMC1 SPA.LVO.105 (a) (1)	
AMC3 SPA.LVO.105(a)	Continuous monitoring programme	
AMC3 SPA.LVO.105 (a),(b),(c)	Operations Manuals Process for reporting of failures in the operational and technical use of procedures and/or equipment.	
AMC4 SPA.LVO.105	Transitional Periods For Cat II And Cat III Operations	
AMC5 SPA.LVO.105	Maintenance Of Cat II, Cat III And LVTO Equipment	
AMC6 SPA.LVO 105	Approach plate supplier and Operating Minima Who is your approach plate supplier? Eligible runways. Confirmation that all minima are calculated in accordance with, GM1 SPA.LVO.100	
SPA.LVO.110 A/C Type specific	Aircraft Flight Manual A copy of the relevant AFM entry showing the aircraft certification standard for AWOPS operations.	
SPA.LVO.115 AMC1 SPA.LVO. 125 SPA.LVO.130	Operations Manual entries and Standard Operating Procedures Manufacturer/operator developed SOP	



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Requirements	Subjects	OM Reference or Document Reference
Example	Example to fill Reference, based on table above	#1, section 4.5, page 445
	Manufacturer's procedures recommended as starting point and must include at least the following: <ul style="list-style-type: none"> <li>Definitions.</li> <li>Crew qualifications for Low Visibility operations.</li> <li>Equipment required for Low Visibility operations.</li> </ul>	
AMC1 SPA.LVO.120	Ground school training Syllabus should follow guidelines in AMC1 SPA.LVO.120 (a), (b) and (d)	
AMC1 SPA.LVO.120(c), (d),(e),(f) and (g)	Flight crew qualification and training (simulator/flight training) Syllabus should follow guidelines in AMC1 SPA.LVO.120 (c) and (d) Initial qualification requirements. Recurrent/revalidation requirements. Recency requirements.	
SPA.LVO.125 AMC1 SPA.LVO. 125	Operations Manual entries and Standard Operating Procedures Approach and landing: <ul style="list-style-type: none"> <li>Modes of operation.</li> <li>Statement that autopilot/flight director must be used whenever possible.</li> <li>AWOPS fuel considerations.</li> <li>Minimum visual references for landing.</li> <li>Approach Ban and RVR.</li> <li>Cross-wind limits.</li> <li>Effect of irregular pre-threshold terrain.</li> <li>Stabilised Approach Criteria.</li> <li>Correct seating and eye position.</li> <li>Designation of PF and PNF and their duties.</li> <li>Use of automatic flight control system.</li> <li>Checklist handling.</li> <li>Approach briefing.</li> <li>Radio communications handling.</li> <li>Monitoring and cross-checking of instruments and radio aids.</li> <li>Cockpit call outs.</li> <li>Contingency procedures including: <ul style="list-style-type: none"> <li>Use of equipment downgrade list;</li> <li>failures above and below decision height;</li> <li>ILS deviation warnings;</li> <li>autopilot disconnect;</li> <li>auto-throttle disconnect;</li> <li>electrical failures;</li> <li>engine failure;</li> <li>failures and loss of visual references at Or below decision height; and</li> <li>pilot incapacitation.</li> </ul> </li> </ul>	
SPA.LVO.130	Minimum equipment	
CAT.OP.MPA.305 AMC1 CAT.OP.305	Procedures for commencement and continuation of approach	



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Requirements	Subjects	OM Reference or Document Reference
Example	Example to fill Reference, based on table above	#1, section 4.5, page 445
ORO.GEN.200	SPA.LVO Operations Operators Safety culture and policy, Low Visibility operations Initial and Continuous.	

#### 4. Summary.

ii) Do the Operations Manuals include all above listed elements to support such operations?	YES <input type="checkbox"/> / NO <input type="checkbox"/>
iii) Does the Operator's MEL embody all operational procedures and processes for upgrade / downgrade of LVO/AWO due to system failures within such critical systems?	YES <input type="checkbox"/> / NO <input type="checkbox"/>
iv) Has LVO/AWO training, both initial and recurrent, for flight crew been incorporated in Training practices? <b>If Yes, provide details:</b>	YES <input type="checkbox"/> / NO <input type="checkbox"/>
<b>b) Give details of crew experience in LVO/AWO operations.</b>	
<div style="border: 1px solid black; height: 100px; width: 100%;"></div>	
<b>c) What is your Proposed Date for the commencement of LVO/AWO operations?</b>	

## 5. Technical Declaration

*I hereby declare that to the best of my knowledge the particulars entered on this application are accurate and a true statement of all the aircraft on this maintenance programme and compliant with the terms and conditions of the Basic Regulation (EU) No 2018/1139, including its Implementing Rules, as amended.*

*I further declare that I hold all the necessary aircraft data and airworthiness records to enable confirmation that the aircraft is LVO/AWO compliant and contracted CAMO & Maintenance Organizations are capable to support LVO/AWO operations.*

*I understand that the ANAC may conduct sample checks upon aircraft, the location of the maintenance and aircraft records.*

Name of person holding technical responsibility: \_\_\_\_\_

Person holding technical responsibility: **Operator AIRWORTHINESS MANAGER**

Signature of Airworthiness Manager (person technically responsible):

\_\_\_\_\_

*I hereby declare that to the best of my knowledge, the particulars entered on this application related to **Flight Operations Elements** are accurate and compliant with the terms and conditions of the Basic Regulation (EU) No 2018/1139, including its Implementing Rules, as amended.*



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Name of person holding Flight Operations responsibility as FOM: \_\_\_\_\_

Signature of FOM (person holding Flight Operations responsibility):  
\_\_\_\_\_

Date: \_\_\_\_\_

Please note that a minimum of 30 working days will normally be required to check and confirm the information given above - If data is missing or omitted, the process may take considerably longer.