



## Airworthiness Oversight Department

### RNP APCH Airworthiness Approval Process Form

<b>• Name of the Operator</b>			
<b>• Address</b>			
<b>• Applicant Focal Point</b>	<b>Name</b>	<b>Telephone No.</b>	<b>E-Mail</b>

Aircraft Manufacturer, Model and Series	Aircraft Registration	List(s) of RNP APCH equipment by make and model attachment(s)

I	Airworthiness application's attachments	Attachment no./ref.	Submitted		Inspector comments
			Yes	No	
(a)	<p><b>Airworthiness documents showing aircraft eligibility for RNP APCH</b> AFM, AFM revision, AFM supplement, or Type certificate data sheet (TCDS) showing that the RNP navigation system is eligible for RNP APCH, or;</p> <p>Manufacturer statement; Aircraft with a manufacturer statement documenting compliance.</p> <p>If Aircraft is modified/or in process to be modified to meet RNP APCH standards. Submit the documentation and records of modification of aircraft systems.</p>				
(b)	<p><b>RNP APCH system requirement</b></p> <p>The operator must have a configuration list and, if necessary, an MEL detailing the required aircraft equipment for RNP APCH operations to LNAV and/or LNAV/VNAV minima.</p>				
(c)	<p><b>Maintenance program</b></p> <ol style="list-style-type: none"> <li>1. For aircraft with established maintenance procedures for RNP APCH systems, the list of references of the document or program,</li> <li>2. For recently installed RNP APCH systems, the maintenance procedures for review.</li> </ol>				
(d)	<p><b>Minimum equipment list (MEL) if applicable</b> showing provisions for RNP APCH systems. <i>Note: Any MEL revisions necessary to address provisions for RNP APCH operations to LNAV and/or LNAV/VNAV minima must be approved. Operators must adjust the MEL, or equivalent, and specify the required dispatch conditions.</i></p>				
(e)	<p><b>Training</b></p> <p>Training program for maintenance personnel (CAMO and AMO)</p>				
(f)	<p><b>Policies and procedures (P&amp;P)</b></p> <p>Continuing Airworthiness P&amp;P (CAME) sections and checklists attached to the application corresponding to RNP APCH configuration and eligibility.</p>				



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(g)	Navigation database (if carried)			
	Details of the navigation data validation program			
<b>II</b>	<b>Assessment of Aircraft Eligibility for RNP APCH</b>	<b>Reference paragraphs ICAO Doc 9613 Vol II Part C5</b>	<b>Operator submitted compliance document/ attachment</b>	<b>Inspector review/comments</b>
<b>(a)</b>	<b>Aircraft and System eligibility for RNP APCH</b>			
1.	Aircraft with a statement by the manufacturer	5.3.2.2		
2.	Aircraft that have a statement of compliance in their flight manual (AFM), AFM supplement, pilot operations handbook (POH), or in the avionics operating manual	5.3.2.2		
	Aircraft Modification	5.3.2.2		
<b>(b)</b>	<b>Continuing Airworthiness (CA)</b>			
1.	Continuing airworthiness instructions applicable to the aircraft configuration and the aircraft qualification for RNPAPCH.	5.3.2.3.5		
2.	Maintenance program, including reliability program for monitoring the equipment.	5.3.2.3.5		
<b>(c)</b>	<b>Aircraft and system requirements</b>			
1.	RNP installation based on GNSS standalone system	5.3.3.1, Notes/3		
2.	RNP installation is based on GNSS sensor equipment used in a multi-sensor system	5.3.3.1, Notes/3		
	<i>Note: Positioning data from other types of navigation sensors can be integrated with GNSS data provided they do not cause position errors that exceed the total system error (TSE)). Otherwise, means must be provided to deselect or cancel the other types of navigation sensors. system</i>	5.3.3.2		
<b>(d)</b>	<b>Functional requirements</b>	5.3.3.3		

#### Applicant Declaration:

I confirm that the information contained herein is correct and complete

**Organization CAMO Manager Name**

**Signature**

**Date**

#### FOR CARC USE ONLY

III	CARC Survey and Inspection	Inspection Report Ref.	Corrective Actions (CA) Ref.	CA Acceptance Ref.
	If necessary, a formal inspection is arranged with the operator. During the inspection, the operator is required to demonstrate how the requirements are being met.			

#### CARC/AWOD Recommendation

Issue Airworthiness Approval Letter

Yes

No

**Airworthiness Inspector**

**Name**

**Signature**

**Date**

