SOUTH AFRICAN CIVIL AVIATION AUTHORITY

Section/division: **AIRWORTHINESS**
Telephone number: **011-545-1000** *Fax Number:* **011-545-1461**
Physical address: **Ikhaya Lokundiza, 16 Treur Close, Waterfall Park, Bekker Street, Midrand, Gauteng**
Postal address: **Private Bag X73, Halfway House 1685** *Website:* **www.caa.co.za**

Form Number: CA 91-13

DETAILS OF BANK ACCOUNT FOR PAYMENT OF PRESCRIBED FEE			
Bank: **Standard Bank of SA Ltd**	*Branch:* **Brooklyn, Pretoria**	*Branch Code:* **011245**	*Account Number:* **013007971**

COMPULSORY CLIENT PAYMENT CODE (to be completed on deposit slip)		
Service/transaction	***Over the counter payments***	***EFT, Internet, Wire, Electronic payments***
Application for reduced vertical separation minima aircraft approval		

APPLICATION FOR REDUCED VERTICAL SEPARATION MINIMA AIRCRAFT APPROVAL (RVSM)

1.	**OPERATOR'S DETAILS**				
1.1	Name of operator				
1.2	Full business / residential address				
				Postal code	
1.3	Postal address				
				Postal code	
1.4	Telephone number		1.5	Fax number	
2.	**AIRCRAFT DESCRIPTION**				
2.1	Aircraft registration marks				
2.2	Manufacturer		2.3	Model designation	
2.4	Airframe serial number		2.5	A/C Mode S (HEX) Code	
3.	**DESCRIPTION OF AIRCRAFT MINIMUM EQUIPMENT as per TGL 6**				
3.1	Two independent altitude measurement systems				
3.2	One automatic altitude-control system				
3.3	One altitude alerting device				
3.4	Operating transponder with altitude reporting system				
3.5	ACAS II				

4.	**DOCUMENTS TO BE ATTACHED TO THIS APPLICATION: AIRCRAFT/ OPERATIONS RVSM-COMPLIANCE DOCUMENTS (RVSM AIRWORTHINESS/OPERATIONAL)**			***Kindly mark appropriate block***
4.1	a	For aircraft not manufactured RVSM compliant: • As applicable: Service Bulletin (SB), Supplemental Type Certificate (STC), Aircraft Service Change (ASC) or Service Letter (SL)	**OR**	
4.1	b	For aircraft manufactured RVSM-compliant: • AFM, AFM Supplement and/or Type Certificate Data Sheet (TCDS)	**AND**	
4.2	Revised copy of AFM Supplement			
4.3	Documentation of Aircraft Inspection and/or Modification			
4.4	Minimum Equipment List (only for operators operating under an MEL)			
4.5	Maintenance Program.			
	(Stand-alone RVSM Maintenance Manual or list of RVSM maintenance elements incorporated into an existing approved program.)			
4.6	RVSM Monitoring: (method and schedule to complete RVSM height monitoring)			
4.7	Proof of operational approval			
4.8	Proof of payment			

5. DECLARATION: I hereby declare that I am, or have applied to be, the registered owner or operator (or the agent of the registered owner or operator) of the aircraft described in paragraph 2 and to the best of my knowledge and belief, the particulars contained in this application are accurate in every respect.

SIGNATURE OF OPERATOR / OWNER / AGENT	**NAME IN BLOCK LETTERS**	**DATE**