



Croatian Civil Aviation Agency

Zahtjev za izdavanje certifikata kvalifikacije FSTD-a *Application for FSTD Qualification Certificate*

Hrvatska agencija za civilno zrakoplovstvo / Croatian Civil Aviation Agency (CCAA)
Ulica grada Vukovara 284, 10 000 Zagreb
Tel.: +385 1 2369 300; Fax.: +385 1 2369 301
e-mail: ccaa@ccaa.hr

Upravna pristojba – 70,00 kn
(nalijepiti ovdje)

FSTD Avion (*Aeroplane (A)*) FSTD Helikopter (*Helicopter (H)*)

Inicijalna evaluacija od CCAA / *Initial evaluation by CCAA*

DIO A / PART A

(Napomena: Mora se dostaviti CCAA ne kasnije od 3 mjeseca prije zatraženog datuma kvalifikacije)
(NOTE: To be submitted to CCAA not less than 3 months prior to requested qualification date.)

Vrsta FSTD-a / <i>Type of FSTD</i>	Tip / klasa zrakoplova <i>Aircraft Type/Class</i>	Razina kvalifikacije koja se traži (molimo: zaokružite primjenjivo) <i>Qualification Level Sought (please: circle relevant)</i>				
		A	B	C	D	Sp./Cat
FFS Simulator letenja / <i>Full Flight Simulator</i>						
FTD Uređaja za letačko osposobljavanje / <i>Flight Training Device</i>		1	2	3 (ONLY H)		
FNTP Uređaja za osposobljavanje letačkih i navigacijskih procedura / <i>Flight and Navigation Procedures Trainer</i>		I	II	III (ONLY H)	II MCC	III MCC (ONLY H)
BITD Uređaja za vježbanje osnovnih instrumentalnih procedura / <i>Basic Instrument Training Device</i>						

Zahtijeva li se privremena kvalifikacija / *Is an interim FSTD Qualification requested?*

DA/ YES NE/ NO

Napomene: Sastanci s CCAA su obavezni prije podnošenja zahtjeva.

Ukoliko jedan FSTD predstavlja više od jednog modela zrakoplova ili varijantu, za svaki model zrakoplova ili varijantu podnosi se zasebni zahtjev za ishođenje certifikata kvalifikacije FSTD-a.

Notes: *Pre-application meetings with CCAA are obligatory.*

If one FSTD represents more than one aircraft model or variant, for each aircraft model or variant application for FSTD Qualification Certificate shall be submitted.

Datum/ *Date:* _____

Poštovani / *Dear,*

<naziv podnositelja zahtjeva/ *Name of Applicant*>

podnosi zahtjev za pregled uređaja za osposobljavanje koji simulira let / *requests the evaluation of its flight simulation training device*

<vrsta FSTD-a / *operator's identification of the FSTD*>

za kvalifikaciju/ *for qualification.*

<naziv proizvođača FSTD-a/ *FSTD manufacturer's name*>

FSTD-a s svojim / *FSTD with its*

<vizualni sustav i naziv proizvođača, ako je primjenjivo / *visual system and manufacturer's name, if applicable*>
vizualnim sustavom / *visual system*.

Pregled je potreban za sljedeću konfiguraciju i opremu motora kako je primjenjivo (npr. 767 PW/GE and 757RR, itd.) /

Evaluation is requested for the following configurations and engine fits as applicable (e.g. 767 PW/GE and 757RR, etc.):

- 1 _____
- 2 _____
- 3 _____

Traženi datumi su / *Dates requested are:* _____
i FSTD će biti smješten / *and the FSTD will be located*
na sljedećoj adresi / *at:*

QTG će biti podnesen do / *The QTG will be submitted by* _____ <datum / *date*>
i u svakom slučaju u roku ne manjem od 30 dana prije zatraženog datuma pregleda osim ukoliko nije
drugačije dogovoreno s CCAA
/ and in any event not less than 30 days before the requested evaluation date unless otherwise agreed with CCAA.

Komentari / drugi relevantni detalji /
Comments/ any additional relevant details:

**Use additional sheets as necessary.*

Ime i prezime / <i>Name and Surname:</i>	
Pozicija/ <i>Position/ appointment held:</i>	
Potpis / <i>Signed:</i>	
Adresa elektronske pošte / <i>E-mail address:</i>	
Broj telefona/ <i>Telephone number:</i>	

DIO B / PART B

(Napomena: Ispuniti s priloženim rezultatima QTG-a.)
(NOTE: To be completed with attached QTG results.)

Datum/ Date: _____

Testovi FSTD-a su završeni te se izjavljuje kako su ispunjeni svi primjenjivi zahtjevi osim kako je navedeno dolje /
We have completed tests of the FSTD and declare that it meets all applicable requirements except as noted below.

Sljedeće QTG testove je potrebno dostaviti naknadno/
The following QTG tests still have to be provided:

Testovi / Tests	Komentari / Comments

*Use additional sheets as necessary.

Očekuje se da će biti završeni i dostavljeni 3 tjedna prije datuma pregleda.

It is expected that they will be completed and submitted 3 weeks prior to the evaluation date.

Ime i prezime / Name and Surname:	
Pozicija/ Position/ appointment held:	
Potpis / Signed:	
Adresa elektroničke pošte / E-mail address:	
Broj telefona/ Telephone number:	

DIO C / PART C

(Napomena: Ispuniti će se i dostaviti u roku ne manjem od 7 dana prije inicijalnog pregleda)
(Note: To be completed not less than 7 days prior to initial evaluation.)

Datum/ Date: _____

Slijedeći tim je evaluirao FSTD / *The FSTD has been assessed by the following evaluation team:*

(ime) <i>(name)</i>		Kvalifikacije / <i>Qualification</i>	
(ime) <i>(name)</i>		Kvalifikacije / <i>Qualification</i>	
(ime) <i>(name)</i>		Kvalifikacije / <i>Qualification</i>	
(ime) <i>(name)</i>		Dozvola pilota/ <i>Pilot's Licence Nr</i>	
(ime) <i>(name)</i>		<i>Flight Engineer's licence Licence Nr (if applicable)</i>	

*Use additional sheets as necessary.

FFS/FTD: This team attests that the _____ <type of FSTD> conforms to the aeroplane flight deck/helicopter cockpit configuration of _____ <name of aircraft operator (if applicable), type of aeroplane/helicopter> aeroplane/helicopter within the requirements for _____ <type of FSTD and level> and that the simulated systems and subsystems function equivalently to those in that aeroplane/helicopter. The pilot of this evaluation team has also assessed the performance and the flying qualities of the FSTD and finds that it represents the designated aeroplane/helicopter.

FNPT: This team attest(s) that the _____ <type of FSTD> represents the flight deck or cockpit environment of a _____ <aeroplane/helicopter or class of aeroplane/type of helicopter> within the requirements for _____ <type of FSTD and level> and that the simulated systems appear to function as in the class of aeroplane/type of helicopter. The pilot of this evaluation team has also assessed the performance and the flying qualities of the FSTD and finds that it represents the designated class of aeroplane/type of helicopter.

Dodatni komentari kako je potrebno/ *Additional comments as required:*

*Use additional sheets as necessary.

Ime i prezime / <i>Name and Surname:</i>	
Pozicija/ <i>Position/ appointment held:</i>	
Potpis / <i>Signed:</i>	
Adresa elektronske pošte / <i>E-mail address:</i>	
Broj telefona/ <i>Telephone number:</i>	

PRILOZI ZAHTJEVU / APPENDICES TO APPLICATION

1. Priručnik(e) koji opisuje sustav upravljanja / description of management system

(uključujući, između ostalog potrebnog i opis sustava upravljanja sigurnošću, opis sustava nadgledanja usklađenosti, opis svih FSTD relevantnih procedura, itd.)

(including: description of safety management system, description of compliance monitoring, relevant FSTD procedures, etc.)

Priručnik(e) je potrebno dostaviti u papirnoj verziji i u verziji na elektronskom mediju.

2. QUALIFICATION TEST GUIDE (QTG) – priručnik

Priručnik je potrebno dostaviti u papirnoj verziji i u verziji na elektronskom mediju.

3. U svrhu identifikacije FSTD-a i utvrđivanja detaljnih tehničkih specifikacija potrebno je dostaviti sljedeće podatke i dokumentaciju/ priručnike:

For the purpose of FSTD identification and detailed technical specification it is required to deliver following data and documentation:

- a) *type of FSTD?*
- b) *FSTD represents one or more types/ class of aircraft or is generic?*
- c) *is FSTD convertible?*
- d) *description of engine(s) and equipment fit?*
- e) *is different engine(s) and equipment fit on one FSTD?*
- f) *FSTD manufacturer?*
- g) *when FSTD has been manufactured?*
- h) *registration/ serial number?*
- i) *date of entry into service?*
- j) *host computer?*
- k) *what type of visual and its characteristics? Field of View? Technology? Collimated? Day? Dusk? Dawn? Night?*
- l) *what type of motion and its characteristics?*
- m) *type of IOS, simulated version(s)?*
- n) *standards of all the aircraft computers, if applicable?*
- o) *proof of any prior certification/ qualification if held?*
- p) *manuals needed for an evaluation*

(e.g. flight manuals, system manuals, acceptance test manual, IOS user manual, FSTD maintenance manual, etc. –as applicable) shall be provided (electronic format also acceptable)

Airport visual databases including for each visual scene, name of the airport, IATA and ICAO codes, type of visual scene (specific or generic), additional capabilities (e.g. snow model, WGS 84 compliance, enhanced ground proximity warning system (EGPWS))

*Use additional sheets as necessary.

4. Dokaz o pravnom statusu organizacije (Confirmation of the legal status of the Organisation)

- a) Rješenje trgovačkog suda ili drugog nadležnog tijela
- b) Presliku Statuta organizacije – ukoliko se radi o udruzi građana