



Approval for operations in North Atlantic High-Level Airspace (NAT HLA)

CASR 91.045, Part 91 Manual of Standards, s 11.08

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Purpose of this form

Use this form to provide details for the initial issue, renewal or variation of the NAT HLA approval.

Who is this form for?

This form is for Part 121, Part 135 and Part 91 operators of aircraft seeking *CASR 91.045* approval to conduct operations in the NAT HLA.

Information needed to complete this form

This form references specific documentation that should be attached or details included in the space provided to support the application.

Aviation Reference Number (ARN)

An ARN is required to complete this form. If you do not have an ARN, [apply now](#).

If you are applying on behalf of an organisation, you will need to have authority to act on the entity's (applicant's) behalf and be able to provide the organisation's ARN.

Contact details

It is important the contact details on the ARN profile are current. CASA uses these contact details when processing this application.

If your address, contact or other details have changed, you must update them prior to lodging this form. You can do this by [changing your details](#) on the CASA website.

Failure to provide up to date contact details to CASA could result in additional fees being charged under the *Civil Aviation (Fees) Regulations 1995* and may constitute a criminal offence.

For more information

Go to the [CASA website](#) or [contact us](#).

Application type

- 1 What are you **applying** for (select one)?
 - Initial NAT HLA approval
 - Renewal
 - Variation
 - NAT HLA variation details

Operator Details

- 2 What are the **operator** details?

Your contact details must be current. Update contact details via [changing your details](#).

Full name

ARN

AOC number

AOC expiry date (DD/MM/YYYY)
/ /

Contact person

Email

Phone number

Aircraft details

- 3 What are the **aircraft** details?
 - Aircraft Manufacturer
 - Model/series
 - Serial number
 - Registration mark (VH-)

 If more than one registration mark of the same aircraft type with identical equipment as specified in this application, attach a list of all registrations

Exposition: Flight Manual (AFM) and Operations Manual (OM) sections detailing operations in NAT HLA

- 4 Has the AFM and/or OM been amended to support the equipment and operating procedures required for operations in the NAT HLA?

No

Yes

 Attach AFM and/or OM sections detailing the required equipment, normal and non-normal procedures for operations in the NAT HLA as specified in NAT Doc 007 NORTH ATLANTIC OPERATIONS AND AIRSPACE Manual

RVSM Approval

- 5 Is the aircraft and operator RVSM approved?

No

Yes

 Provide approval for each aircraft

Communication Capability

6 Is the aircraft NAT Data Link Management (NAT DLM) capable?

No

Yes

Is the aircraft SATCOM/SATVOICE equipped?

No

Yes

Navigation Capability

7 Is the aircraft fitted with two Long Range Navigation Systems (LRNS)?

No

Yes

Is the aircraft fitted with Single LRNS equipment only – GNSS?

No

Yes

Note: Specifically GNSS must be FAA TSO-C129 or later, or EASA ETSO – C129a approved

Is the aircraft fitted with Short range navigation equipment only - VOR, DME, ADF?

No

Yes

Is the aircraft and operator RNP 4 capable?

No

Yes

Is the aircraft and operator RNP 10 (RNAV 10) capable?

No

Yes

Surveillance Capability

8 Is the aircraft equipped with an TCAS II (7.1) surveillance transponder?

No

Yes

Is the aircraft fitted with ADS-C equipment?

No

Yes

Is the aircraft fitted with ADS-B equipment?

No

Yes

PBCS capability and authorisation

9 Is the aircraft and operator RCP 240 capable?

No

Yes

 Provide authorisation

Is the aircraft and operator RSP 180 capable?

No

Yes

 Provide authorisation

Have contract services been established for PBCS?

No

Yes

FANS capability

10 Is the aircraft FANS compliant?

No

Yes

Other equipment

11 Other specific aircraft equipment to support operations in the NAT HLA?

No

Yes - Provide details of other equipment i.e., HF, SELCAL

Software update control

12 Does the operator have processes and procedures in place to update software supporting equipment required for operations in the NAT HLA, i.e., FANS1/A related software updates?

No

Yes

Appropriate maintenance and continuing airworthiness to support NAT HLA operations

13 Has the operator implemented maintenance and continuing airworthiness processes and procedures to support operations in the NAT HLA?

No

Yes

14 Does the MEL for each aircraft specifically address the equipment required to support operations in the NAT HLA?

No

Yes

Training

15 Does the operator have a NAT HLA training syllabus for pilots, dispatchers and maintenance engineers?

No

Yes

Polar Operations

16 Is the operator approved for Polar Operations: North of 78 degrees N?

No

Yes

This area has been intentionally left blank

17 I declare:

- All statements in this application are true and correct and that I have read and understood all provisions of the *CASR 91 Manual of Standards, Section 11.08* which are relevant to this application.

I acknowledge by providing my details below and submitting this application:

- I may commit an offence under the *Criminal Code Act 1995* if I make a false or misleading statement in my application.
- We may also use your licensing information in deidentified form for aviation safety research/analysis.

Privacy

Any personal information you provide to CASA, as part of this application, is protected by the *Privacy Act 1988*.

We will use the information provided to process this application and may also use it to conduct identity/security checks. Without your consent, we may not be able to process your application.

To meet our accountability obligations, we may disclose this information:

- to other government agencies or other national aviation authorities for certain purposes, and
- to comply with court orders and other legal requirements.

For more information about how we use, disclose and protect your personal information, see our [privacy statement](#) and [privacy policy](#).

- I declare and acknowledge the above matters.
- I consent to CASA using my licensing information and other personal information for the above purposes.
- I have read CASA's privacy policy and I authorise CASA to use and disclose the information it collects for this application in accordance with that policy.

Full name

Signature

Date (DD/MM/YYYY)

/ /

Role authority

18 In what capacity are you making this declaration?

- Self
- Director
- Agent
- Executor
- Other, please specify:

An authority must be provided if the person making this declaration is **not** the individual or an office holder of the Operator named in question 2.

 Provide authority

Submitting this form to CASA

 By email – attach this form and all supporting documents. Send them to regservices@casa.gov.au