



HEMS Approval Application Form Flight Operations Department

APPLICATION FOR HELICOPTER EMERGENCY MEDICAL SERVICE (HEMS) APPROVAL

Prior to engaging in HEMS operations, a specific approval by the competent authority shall have been issued to operator.

To obtain such approval by the competent authority, the operator shall operate in CAT, hold a CAT AOC in accordance with Annex III (Part-ORO) and demonstrate to the competent authority compliance with the requirements contained in Subpart SPA.HEMS.

1, Operator details:

Operator name	
Operator address	
AOC number	
Contact details	

Section 2, Helicopter details

Helicopter type	
Registration marks	
Helicopter serial number	

In case of more than one helicopter ore different types expand the upper table as applicable.

Section 3, Intended areas of operations, planned operations

Areas of operations	Planned operations (CAT/HEMS)

Section 4, Documentation to be provided



HEMS Approval Application Form Flight Operations Department

Copies of the following documents are required.

- Relevant extracts/references from operations manual Part A, B, C and D compliant with HEMS requirements
- MEL compliant with HEMS requirements
- Completed management of changes and related safety risk assessment documentation
- Relevant extracts/references from RFM and STC
- Proof of implementation of the Usage monitoring system (UMS)
- Other documents if applicable

Section 5, Compliance list

Item	Requirements	Operator's Operations Manual or another document Reference	Confirmed by responsible person : (Signatures or initials)
Medical Equipment(SPA.HEMS.110)	Equipment requirements for HEMS operations shall be in accordance with regulation 748/2012.		
SPA.HEMS.115 Communication	In addition to that required by CAT.IDE.H, helicopters conducting HEMS flights shall have communication equipment capable of conducting two-way communication with the organization for which the HEMS is being conducted		
SPA.HEMS.120 Operating Minima	Refer SPA.HEMS.120 paragraph A and B. Additional GM1 SPA.HEMS.120 HEMS operating minima if applicable		
SPA.HEMS.125 Performance Requirements	Refer to SPA.HEMS.125 and relevant AMC. (AMC1 SPA.HEMS.125(b)(4)) (GM1 SPA.HEMS.125(b)(3))		
SPA.HEMS.130 Crew Requirements	Refer to SPA.HEMS.130 and all relevant AMC/GM.		
	AMC1 SPA.HEMS.130(b)(2) EXPERIENCE		
	AMC1 SPA.HEMS.130(d) RECENCY		
	AMC1 SPA.HEMS.130(e) HEMS TECHNICAL CREW MEMBER		
	AMC1 SPA.HEMS.130(e)(2)(ii)(B) FLIGHT FOLLOWING SYSTEM		
	AMC1 SPA.HEMS.130(f)(1) TRAINING AND CHECKING SYLLABUS		
	AMC1 SPA.HEMS.130(f)(2)(ii)(B)		



HEMS Approval Application Form Flight Operations Department

	LINE CHECKS		
SPA.HEMS.135 HEMS Medical Passenger and other personnel briefing	Refer to SPA.HEMS.135 and all relevant AMC/GM.		
	AMC1 SPA.HEMS.135(a) HEMS MEDICAL PASSENGER BRIEFING		
	AMC1 SPA.HEMS.135(b) GROUND EMERGENCY SERVICE PERSONNEL		
SPA.HEMS.140 Information and Documentation	Refer to SPA.HEMS.140 and all relevant AMC/GM		
	AMC1 SPA.HEMS.140 OPERATIONS MANUAL		
SPA.HEMS.145 HEMS Operating Base Facilities	Refer to SPA.HEMS.145.		
SPA.HEMS.150 Fuel Supply	Refer to SPA.HEMS.150		
SPA.HEMS.155 Refueling with passengers embarking, on board or disembarking	Refer to SPA.HEMS.155		

Further Comments to support your application:

Flight Operations Manager Name:

Signature:

Continuing Airworthiness Manager Name:



**HEMS Approval Application Form
Flight Operations Department**

Signature:

Compliance Monitoring Manager Name:

Signature:

Date:.....

This form is to be completed in full and returned to the: MKDCAA Flight Operations department;
ops@caa.gov.mk

Before grant approval, CAA may require demonstration flight.

For Civil Aviation Authority use only	
Airworthiness Inspector	Flight Operations Inspector
Conformity with Initial and Continuing Airworthiness Requirements:	Conformity with operational criteria and all relevant provisions have been covered by operator's application.
Satisfactory : Yes No	Satisfactory : Yes No
Inspector Name:	Inspector Name:
Signature: Date:	Signature: Date: