About this Application Form:

This form is approved by the Civil Aviation Authority Of Malaysia (CAAM) for the issuance of specific approvals. The application form is made up of five sections as follows:

1) Section A- Details of the Applicant
2) Section B- Details of Proposed/ Approved Type of Operations
3) Section C- Applicant(s) Declaration
4) Section D- Flight Operations Section
5) Section E- Airworthiness Section

Abbreviations

AFM	=	Aircraft Flight Manual
AMMD	=	aircraft moving map display
AMO	=	Approved Maintenance Organisation
AOC	=	Air operator certificate
AWI	=	Airworthiness Inspector
CAAM	=	The Civil Aviation Authority of Malaysia
CAD	=	Civil Aviation Directives
CAGM	=	Civil Aviation guidance manual
CAMO	=	Continuing Airworthiness Management Organisation
DG	=	Dangerous goods
EDTO	=	Extended diversion time operations
EFB	=	Electronic. Flight bag
FOI	=	Flight Operations Inspector
HEMS (H)	=	Helicopter Emergency Medical Service
HHO (H)	=	Helicopter Hoist Operations
HOFO (H)	=	Helicopter Offshore Operations
IMC	=	Instrument meteorological conditions
LVO	=	Low Visibility Operations
MCAR	=	Malaysian Civil Aviation Regulations
MOE	=	Maintenance Organisation Exposition
NAT-HLA	=	North Atlantic High-Level Airspace
NVIS (H)	=	Night Vision Imaging Systems
PMI	=	Principal Maintenance Inspector

POI	=	Principal Operations Inspector
PBN	=	Performance based navigation
RVSM	=	Reduced Vertical Separation Minimum
SET-IMC	=	Single - Engined Turbine Aeroplane Operations at night or in IMC
SPA	=	Specific approval
SAM	=	Specific Approvals Manger
SME	=	Subject Matter Expert
TSO	=	Technical Standard Order
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GUIDELINES FOR COMPLETING THIS APPLICATION FORM

All applicants shall fill all sections of this application form. If applying for multiple specific approvals, only ONE section A to section C is required, followed with all the relevant section D and section E as applicable to the SPA being applied for.

All information will be used to assess if the applicant is entitled to a Specific Approval. An incomplete, poorly prepared or inaccurate application may:

- Result in rejection of the application
- Result in delays
- Result in a refusal to issue the SPA.

Please remember it is an offence to make a false declaration in this form in accordance with Regulation 164 of the Civil Aviation Regulations 2016 (MCAR 2016)

If the form is filled by hand, use block letters and either a black or blue ballpoint pen. Some questions contain check boxes. Annotate with a ✓ where appropriate. This information is used by the F.O.I/A.W.I when going through the application package.

Section A – Details of the applicant					
Applicant type: ☐ Initial issue of Specific Approval ☐ Variation to existing Specific Approval			AOC Number: Proposed Start Date:		
Details of the operator of the aircraft:					
Name of Operator					
Trading name if different					
Phone			Fax		
Registered Address					
			City		
	State		Postcode		
Details of the person that you wish CAAM to contact in relation to this application					
Full Name					
Phone			Mobile		
Email					
Section B – Details of proposed type of operations					
☐ **RVSM**	☐ **PBN**	☐ **LVO**	☐ **EDTO**	☐ **EFB**	
☐ **MNPS**	☐ **PBCS**	☐ **CPDLC**	☐ **ADS-C**	☐ **ADS-B OUT**	
☐ **ADS-B IN**	☐ **NVIS(H)**	☐ **HHO(H)**	☐ **HEMS(H)**	☐ **HOFO(H)**	
☐ **SET-IMC**	☐ **DG**	☐ **Others**	**Specify:**		
Proposed/Approved Type of Operations					
☐ **Schedule**	☐ **Non-Schedule**	☐ **Passenger**	☐ **Cargo**		

Authorisation and Aircraft Details – Provide details of the aircraft.							
***Note: the column "SPA being applied for" is only applicable when applying for different SPA's on different aircraft. If applying for similar SPA's on all aircraft listed below as ticked in section B, the column need not be filled.**							
#	Aircraft Manufacturer	Aircraft Model	MSN	Registration Mark	Is it a new Aircraft? (Y/N)	Est. date of entry into service dd/mmm/yy. *(applicable to new aircraft only)*	SPA being applied for.*

(Use additional sheets if necessary)

Section C- Applicants Declaration

DECLARATION

1. I declare and undersign below that the statements, answers and attachments provided in this application form is true and correct to the best of my knowledge in accordance with Civil Aviation Regulations 2016 (MCAR) and Civil Aviation Directives (CAD).

   Giving false or misleading information is an offence under Regulation 164 of the Civil Aviation Regulations 2016 (MCAR)

2. I understand that processing the application may be delayed if:

   - The application does not accurately and completely identify my/our requirements; or
   - The details in this application are subsequently changed; or
   - Adequate supporting documentation has not been provided.

3. I understand and agree that for CAAM to proceed with this application, I must:

   - Accept the cost as per civil aviation (fees and charges) regulation; and
   - Forward the prescribed payment; and
   - Forward all supporting documentation as required by the specific approval being applied for.

Note. – CAAM may send materials/responses relating to this application by email or by mail.

Name of DFO		Signature		Date	

Section D & Section E: Flight operations and Airworthiness elements

Applicants are required to complete Part A to Part D.

Part 1 – Aircraft and Installation Details				
Note: Documented Objective Evidence and/or Extracts of manuals must be provided to support answers listed below.				
1. Multiple Aircraft	YES	☐	NO	☐
2. Pressurised Aircraft	YES	☐	NO	☐
3. Paperless cockpit Authorisation sought	YES	☐	NO	☐
4. Installation Class	PORTABLE	☐	INSTALLED	☐
5. EMI Test Report included	YES	☐	NO	☐

Part 2 – EFB Hardware Details (identify the EFB hardware to be used)				
1. EFB hardware				
2. EFB operating system				
3. Rapid Decompression test report (required for pressurised aircraft)				
4. Stowage means/Location (portable only)				
5. Aircraft electrical power supply used	YES	☐	NO	☐
6. If yes to number 5 above, installation STC/modification reference (portable and installed)				

If space insufficient to provide details, kindly annotate the number and provide additional details accordingly (If required)

Part 3 – EFB Software application details (identify EFB software application to be used)		
Application	Software type*	Provider of application
*Software type – TALP, M&B, TACS, AMMD, ECL, IFW		

Part 4 – Operator Documentation (to submit a copy of the procedures developed to address the following)	
Operators documents	(tick)
1. Operating procedures a. Normal procedures b. One EFB inoperative (when applicable); c. All EFB inoperative	
2. Paperless cockpit procedures (if applicable)	
3. EFB software configuration management	
4. EFB navigation data configuration management	
5. EFB reliability monitoring procedures	

PART 5 – Evaluation Checklist

Note1. – Documented Objective Evidence and/or Extracts of manuals must be provided to support answers listed below.

Note2. – Checklist items are designed so that some questions may not be applicable (check "N/A"). Questions answered as "NO" are meant to allow identifying deficiencies that should be corrected and revalidated prior to approval being issued.

Note3. – The corresponding documents should be listed under "REMARKS"

i) HARDWARE

		✓	REMARKS
1. Have the installed EFB resources been certified by a CAA to accepted aviation standards either during the certification of the aircraft, service bulletin by the original equipment manufacturer, or by a third-party STC?	YES		
	NO		
	N/A		
2. Has the operator assessed the physical use of the device on the flight deck to include safe stowage, crashworthiness (mounting devices and EFBs, if installed), safety and use under normal environmental conditions including turbulence?	YES		
	NO		
	N/A		
3. Will the display be readable in all the ambient lighting conditions, both day and night, encountered on the flight deck?	YES		
	NO		
	N/A		
4. Has the operator demonstrated that the EFB will not electromagnetically interfere with the operation of aircraft equipment?	YES		
	NO		
	N/A		
5. Has the EFB been tested to confirm operation in the anticipated environmental conditions (e.g. temperature range, low humidity, altitude, etc.)?	YES		
	NO		
	N/A		
6. Have procedures been developed to establish the level of battery capacity degradation during the life of the EFB?	YES		
	NO		
	N/A		

		✓	REMARKS
7. Is the capability of connecting the EFB to certified aircraft systems covered by an airworthiness approval?	YES		
	NO		
	N/A		
8. When using the transmitting functions of a portable EFB during flight, has the operator ensured that the device does not electromagnetically interfere with the operation of the aircraft equipment in any way?	YES		
	NO		
	N/A		
9. If two or more EFBs on the flight deck are connected to each other, has the operator demonstrated that this connection does not negatively affect otherwise independent EFB platforms?	YES		
	NO		
	N/A		
10. Can the brightness or contrast of the EFB display be easily adjusted by the flight crew for various lighting conditions?	YES		
	NO		
	N/A		

ii) **INSTALLATION**			
Mounting		✓	REMARKS
1. Has the installation of the mounting device been approved in accordance with the appropriate airworthiness regulations?	YES		
	NO		
	N/A		
2. Is it evident that there are no mechanical interference issues between the EFB in its mounting device and any of the flight controls in terms of full and free movement, under all operating conditions and no interference with other equipment such as buckles, oxygen hoses, etc.?	YES		
	NO		
	N/A		
3. Has it been confirmed that the mounted EFB location does not impede crew ingress, egress and emergency egress path?	YES		
	NO		
	N/A		
4. Is it evident that the mounted EFB does not obstruct visual or physical access to aircraft displays or controls?	YES		
	NO		
	N/A		
5. Does the mounted EFB location minimise the effects of glare and/or reflections?	YES		
	NO		
	N/A		
6. Does the mounting method for the EFB allow easy access to the EFB controls and a clear unobstructed view of the EFB display?	YES		
	NO		
	N/A		
7. Is the EFB mounting easily adjustable by flight crew to compensate for glare and reflections?	YES		
	NO		
	N/A		
8. Does the placement of the EFB allow sufficient airflow around the unit, if required?	YES		
	NO		
	N/A		

iii) **Software**			
Note. – The software part of this section must be completed multiple times to account for the different software applications being considered for use.			
Software application (Fill in the name of the software application)**:**			
		✓	REMARKS
1. Is the application considered an EFB function? *(see Chapter 7 of CAGM 6008 (V) EFB)*	YES		
	NO		
	N/A		
2. Has the software application been evaluated to confirm that the information being provided to the pilot is a true and accurate representation of the documents or charts being replaced?	YES		
	NO		
	N/A		
3. Has the software application been evaluated to confirm that the computational solution(s) being provided to the pilot is a true and accurate solution (e.g. performance, and mass and balance (M&B), etc.)?	YES		
	NO		
	N/A		
4. Does the software application have adequate security measures to ensure data integrity (e.g. preventing unauthorised manipulation)?	YES		
	NO		
	N/A		
5. Does the EFB system provide, in general, a consistent and intuitive user interface, within and across the various hosted applications?	YES		
	NO		
	N/A		
6. Has the EFB software been evaluated to consider HMI and workload aspects?	YES		
	NO		
	N/A		
7. Does the software application follow Human Factors guidance?	YES		
	NO		
	N/A		
8. Can the flight crew easily determine the validity and currency of the software application and databases installed on the EFB, if required?	YES		
	NO		
	N/A		

POWER/BATTERIES		✓	REMARKS
1. Is there a means other than a circuit-breaker to turn off the power source (e.g. can the pilot easily remove the plug from the installed outlet)?	YES		
	NO		
	N/A		
2. Is the power source suitable for the device?	YES		
	NO		
	N/A		
3. Have guidance/procedures been provided for battery failure or malfunction?	YES		
	NO		
	N/A		
4. Is power to the EFB, either by battery and/or supplied power, available to the extent required for the intended operation?	YES		
	NO		
	N/A		
5. Has the operator ensured that the batteries are compliant to acceptable standards?	YES		
	NO		
	N/A		
CABLING			
1. Has the operator ensured that any cabling attached to the EFB, whilst mounted or *hand-held* does not present an operational or safety hazard (e.g. it does not interfere with flight controls movement, egress, oxygen mask deployment, etc.)?	YES		
	NO		
	N/A		

STOWAGE		✓	REMARKS
1. If there is no mounting device available, can the EFB be easily stowed securely and readily accessible in flight?	YES		
	NO		
	N/A		
2. Is it evident that stowage does not cause any hazard during aircraft operations?	YES		
	NO		
	N/A		
VIEWABLE STOWAGE			
1. Has the operator documented the location of its viewable stowage?	YES		
	NO		
	N/A		
2. Has the operator assessed that the stowage characteristics remain within acceptable limits for the proposed operations?	YES		
	NO		
	N/A		
3. Has the operator assessed that if the EFB moves or is separated from its stowage, or if the viewable stowage is unsecured from the aircraft (because of turbulence, manoeuvring, or other action), it will not interfere with flight controls, damage flight deck equipment, or injure flight crew members? (A full motion flight simulator may be used for this assessment)	YES		
	NO		
	N/A		

iv) MANAGEMENT			
EFB Management		✓	REMARKS
1. Is there an EFB management system in place?	YES		
	NO		
	N/A		
2. Does one person possess an overview of the complete EFB system and responsibilities within the operator's management structure?	YES		
	NO		
	N/A		
3. Are the authorities and responsibilities clearly defined within the EFB management system?	YES		
	NO		
	N/A		
4. Are there adequate resources assigned for managing the EFB?	YES		
	NO		
	N/A		
5. Are third parties (e.g. software vendor) responsibilities clearly defined?	YES		
	NO		
	N/A		

Crew Procedures		✓	REMARKS
1. Is there a clear description of the system, its operational philosophy and operational limitations?	YES		
	NO		
	N/A		
2. Are the requirements for EFB availability in the operations manual and / or as part of the minimum equipment list (MEL)?	YES		
	NO		
	N/A		
3. Have crew procedures for EFB operation been integrated within the existing operations manual?	YES		
	NO		
	N/A		
4. Are there suitable crew cross-checks for verifying safety-critical data (e.g. performance, mass & balance (M&B) calculations)?	YES		
	NO		
	N/A		
5. If an EFB generates information similar to that generated by existing flight deck systems, do procedures identify which information will be primary?	YES		
	NO		
	N/A		
6. Are there procedures when information provided by an EFB does not agree with that from other flight deck sources, or, if more than one EFB is used, when one EFB disagrees with another?	YES		
	NO		
	N/A		
7. Are there procedures that specify what actions to take if the software applications or databases loaded on the EFB are out of date?	YES		
	NO		
	N/A		
8. Are there procedures in place to prevent the use of erroneous information by the flight crew?	YES		
	NO		
	N/A		
9. Is there a reporting system for system failures?	YES		
	NO		
	N/A		
10. Have crew operating procedures been designed to mitigate and/or control additional workload created by using an EFB?	YES		
	NO		
	N/A		
11. Are there procedures in place to inform maintenance and flight crew about a fault or failure of the EFB, including actions to isolate it until corrective action is taken?	YES		
	NO		
	N/A		

EFB Risk Assessment		✓	REMARKS
1. Has an EFB risk assessment been performed?	YES		
	NO		
	N/A		
2. Are there procedures/guidance for loss of data and identification of corrupt/erroneous outputs?	YES		
	NO		
	N/A		
3. Are there contingency procedures for total or partial EFB failure?	YES		
	NO		
	N/A		
4. Is there a procedure in the event of EFB failure? *The operator may employ mitigation strategies to reduce the probability of EFB failures prior to becoming airborne. Adequate mitigations must be employed to ensure pertinent critical information resident on the EFB is available to the flight crew during the flight. In such cases the operator will have to demonstrate to CAAM a full Operational Risk Assessment with suitable means of mitigation against failure or malfunction of all EFBs.*	YES		
	NO		
	N/A		
5. Have the EFB dispatch requirements (e.g. minimum number of EFBs on board) been incorporated into the operations manual?	YES		
	NO		
	N/A		
6. Have MEL or procedures in case of EFB failure been considered and published?	YES		
	NO		
	N/A		

Training		✓	REMARKS
1. Is the training material appropriate with respect to the EFB equipment and published procedures?	YES		
	NO		
	N/A		
2. Does the training cover the list of items in Chapter 5 – *Flight crew training* of CAGM 6008 (V) – EFB	YES		
	NO		
	N/A		
Hardware Management Procedure			
1. Are there documented procedures for the control of EFB hardware configuration?	YES		
	NO		
	N/A		
2. Do the procedures include maintenance of EFB equipment?	YES		
	NO		
	N/A		
Software Management Procedure			
1. Are there documented procedures for the configuration control of loaded software and software access rights to the EFB?	YES		
	NO		
	N/A		
2. Are there adequate controls to prevent corruption of operating systems, software, and databases?	YES		
	NO		
	N/A		
3. Are there adequate security measures to prevent system degradation, malware and unauthorised access?	YES		
	NO		
	N/A		
4. Are procedures defined to track database expiration/updates?	YES		
	NO		
	N/A		
5. Are there documented procedures for the management of data integrity?	YES		
	NO		
	N/A		
6. If the hardware is assigned to the flight crew, does a policy on private use exist?	YES		
	NO		
	N/A		

FOR CAAM USE ONLY		
Date of Initial application Received by administrator		…… Name & Signature of CAAM Personnel
Fee payable		
Cash / Credit Card		
Receipt No.:		

Subject	**Responsible division**	**Date**	**Name & Signature**
Application Form and application package checked for completeness.	SAM & Airworthiness SME		
Airworthiness Recommendation granted	Airworthiness SME/PMI		
Operational Approval granted *(AOC, AOC Extract, or letter of Authorisation).*	POI/SAM		
Approval process administratively completed (*OPS Spec Update, Billing, and Exchange of Certificates).*	Administrator		

Approved (if no, state reasons below))	YES		NO	

Remarks (Attach extra sheet(s) if required)**:**