



**GUYANA CIVIL AVIATION AUTHORITY**

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**GCAA**  
**ADVISORY CIRCULAR**

**FLIGHT OPERATIONS**  
**AC NO: GCAA AC/FO-09**

**SUBJECT: EQUIVALENT  
MAINTENANCE SYSTEM**

**DATE ISSUED:** 15-02-2018  
**ISSUED BY:** Director Aviation  
Safety Regulation

*Note: Advisory Circulars (ACs) are not mandatory in nature, but provide means such as guidance, methods, procedures, and practices acceptable to the Authority for complying with regulations, standards, rules, directives, and other requirements in a systematic manner. These are not necessarily the only means of compliance. ACs may also contain explanations of regulations, other guidance material, best practices, or information useful to the aviation community. Unless incorporated into a regulation by reference, ACs are not regulatory in nature and do not create or change a regulatory requirement. A change of a regulatory requirement may come in the form of a Directive. An Advisory Circular is not a Directive.*

**1. PURPOSE**

This Advisory Circular (AC) gives guidance to the Air Operator of commercial aircraft operations (Air Operator Certificate Holder [AOC]) for the establishment of an Equivalent Maintenance System (EMS) under Guyana Aviation Requirements (GARs) Part 9.

**2. AUDIENCE**

This AC is for guidance to operators of commercial air operation under a GARs Part 9 Air Operator Certificate and who is desirous of conducting their aircraft maintenance under a GARs Part 9 Equivalent Maintenance System.

**3. CANCELLATION**

This AC supersedes AC #: GCAA AC/FO-052. AC #: GCAA AC/FO-052 is hereby cancelled.

**4. EFFECTIVE DATE**

This **Advisory Circular** AC #: GCAA AC/FO-09 takes effect from the **7<sup>th</sup> Day of February 2023** and remains valid until cancellation or revocation by the Director General Civil Aviation.

**5. CHANGES**

Correction of the AC numbering to bring it in line with current numbering sequence (052 to 09) and also to give clearer guidance under the regulations.

**6. RELEVANT REFERENCES**

- a. GCARs Part III and IV.
- b. GARs Parts 2, 6 and 9.
- c. ICAO Annex 6, Parts 1, 2 and 3.
- d. ICAO Doc 8335 - Manual on Operations Certification.

## 7. FORM(S) TO BE USED

- a. Form No: GCAA FO/051 – Pre-Application Statement for an Operator EMS.
- b. Form No: GCAA FO/052 – Application for an Equivalent Maintenance System.
- c. Form No: GCAA FO/037 - Air Operator Certification Job Aid and Schedule of Events.
- d. GCAA Form No: GCAA/ASR-G/001-R1 - Management Personnel Biographical Data.

**Note:** See sample forms under the Appendices to this AC.

## 8. CONTACT INFORMATION

Director General Civil Aviation  
Guyana Civil Aviation Authority  
73 High Street, Kingston  
Georgetown, Guyana  
TEL: (592) 225 6822  
FAX: (592) 225 6800  
E-mail: [director-general@gcaa-gy.org](mailto:director-general@gcaa-gy.org)

**OR**

Director Aviation Safety Regulation  
E-mail: [dasr@gcaa-gy.org](mailto:dasr@gcaa-gy.org)

## 9. THE EQUIVALENT SYSTEM OF MAINTENANCE OR EQUIVALENT MAINTENANCE SYSTEM (EMS)

### 9.1 INTRODUCTION

International Civil Aviation Organisation (ICAO) Annex 6, Part 1, Chapter 8 sets out the requirements for international air carrier aeroplane maintenance; Part 2, Subpart 2.6 sets out the requirements for international general aviation aeroplane maintenance, and Part 3, Chapter 6 sets out the requirements for international operations helicopter maintenance.

In general terms ICAO Annex 6 states that an operator shall not operate an aeroplane/helicopter unless it is maintained and released to service by a maintenance organisation or under an equivalent maintenance system, either of which, shall be acceptable to the State of Registry.

GARs Part 6 describes the requirements of an Approved Maintenance Organisation.

GARs Part 9, Subsection 9.4.1.3 requires that "an AOC holder shall not operate an aircraft, except for pre-flight inspections, unless it is maintained and released to service by an **AMO or equivalent system of maintenance** that is approved by the State of Registry and is acceptable to the Authority."

The EMS is not methodically explained or defined under the Guyana Civil Aviation (Air Navigation) Regulations (GCARs), GARs or ICAO Annex 6. However, GARs Part 9, Subsection 9.1.1.2 Definition 13, states:

**"Equivalent system of maintenance.** An AOC holder may conduct maintenance activities through an arrangement with an AMO or may conduct its own maintenance, preventive maintenance, or alterations, so long as the AOC holder's maintenance system is **approved by the Authority and is equivalent to that of an AMO**, except that the approval for return to service of an aircraft/aeronautical product shall be made by an appropriately licensed aviation maintenance technician or aviation repair specialists in accordance with Part 2, as appropriate."

Regulations, however, prescribe rules governing the performance of maintenance, preventive maintenance, and alterations of aircraft having an airworthiness certificate issued by the Guyana Civil Aviation Authority (GCAA). If aircraft maintenance is not done under a Part 6 Approved Maintenance Organisation (AMO), then the operator of commercially operated aircraft shall have its aircraft maintenance done under a Part 9 Equivalent Maintenance System (EMS) prescribed in this AC. It is of utmost importance that the operator conforms to the EMS in all respects to assure acceptability and approval by the Authority.

A prospective operator may, as part of its air operator certification application, apply to conduct its own aircraft maintenance under a GARs Part 9 EMS, apply separately for an AMO certificate, or indicate its intention to contract its aircraft maintenance to an AMO certified by the GCAA.

Should the operator at the time of its air operator certification application request to conduct its own aircraft maintenance under an EMS, then the approval process shall be conducted under the 5-Phase certification process for the AOC.

Should a previously approved AOC holder wish to conduct its aircraft maintenance under an EMS, the AOC holder shall make an application and undergo a 5-Phase certification process for the EMS similar to that of a AMO. (*See Appendix 1, 2 and 3 for appropriate forms.*)

It must be noted that unlike an AMO, an operator having an EMS shall only conduct maintenance on aircraft listed in the operator's AOC Operations Specifications,. In other words, the operator is not allowed to use its EMS to conduct maintenance operations for other operators.

Consequently, the EMS ***shall*** follow the same approval process as, and contain, the same elements as a GARs Part 6 AMO. However, this system will be under a maintenance department of the AOC but does not require a separate certificate as an AMO. The EMS shall be approved during the five-phase process of an AOC and included under Item 17 "Continuing Airworthiness" of the AOC Operations Specifications (Ops Specs).

The following statement shall be inserted under Item 17: "**Equivalent Maintenance System under AOC #: \_\_\_\_.**" (*See Appendix 5 for sample Ops Specs – yellow shaded area in sample Ops Specs indicates what should be inserted in this area.*)

For existing AOC Holder applying for an EMS, after completing the 5-Phase process of approval, their AOC Operations Specifications shall be amended to include the required statement under Item 17 of the Ops Specs.

## **9.2 EMS 5-PHASE CERTIFICATION PROCESS**

- a. **PHASE 1** – Pre-Application;
- b. **PHASE 2** – Formal Application;
- c. **PHASE 3** – Document Evaluation;
- d. **PHASE 4** – Demonstration and Evaluation; and
- e. **PHASE 5** – Certification

### 9.3 PHASE 1 - Pre-Application

As far in advance as possible of an anticipated start of maintenance operations under a Part 9 EMS, the operator (existing AOC Holder) should contact the GCAA Office and inform the Director General (DG) of his intent to apply for an EMS. In the meantime, the AOC Holder shall continue to conduct its commercially operated aircraft under a GCAA certified AMO. Only after the EMS is approved and the statement inserted in the AOC Ops Specs, can the AOC aircraft be maintained under its EMS. However, for a prospective (new) operator, the EMS shall be approved during the AOC 5-Phase process.

The operator will be invited to meet briefly with GCAA personnel. During this initial meeting, only basic information and general certification requirements will be discussed. If the prospective operator intends to proceed with the EMS application, GCAA Form GCAA FO/051 will be provided to him. A sample of this form with instructions for completing it is in Appendix 1. The Authority, through the Director Aviation Safety and Security Regulation, will determine the team who will be assigned to the 5-Phase EMS certification project. The Authority will schedule a pre-application meeting with the operator and the GCAA certification team. The Director Aviation Safety and Security Regulation will designate one of the team member as the Project Manager (PM).

The purpose of the pre-application meeting is to provide critical information to the applicant. It is recommended that the operator's key management personnel, including the nominated maintenance management personnel, attend these pre-application meetings and be prepared to discuss in general terms the plans and specific aspects of the EMS project. Many problems can be avoided by discussing all aspects of the proposed EMS and the specific requirements, which must be met. The project team should:

- a) Ensure the operator is aware of the appropriate regulations regarding maintenance of an aircraft, what the EMS is equivalent to, and what is expected.
- b) Provide an overview of the certification process for the project and the formal application.
- c) Answer any questions raised by the operator.
- d) Evaluate the results of the meeting and take appropriate action.
- e) Provide the operator with an Application Information Package (AIP).

It is important to establish good working relationships and clear understandings between the GCAA project team and the operator's representatives. The Authority recognises that a wide range of capabilities and expertise exists among operators. This background experience will be considered by the project team, and adjusted to, during these initial meetings.

To help promote understanding throughout the process, the AIP includes the following:

- a) The applicable job aids which will be used by the GCAA project team during the process.
- b) A schedule of events which must be completed and submitted with the formal application.  
**(See sample Job Aid and Schedule of Events in Appendix 3.)**
- c) Other publications or necessary documents the project team believes will be useful.
- d) EMS Application Form No: GCAA FO-051.

During the pre-application meeting the project team will assist the operator in identifying from the application, all statements that accurately describe the operator's intended maintenance operation. The operator will then use the application form information for inclusion into its operations specifications. The operator's draft maintenance operations to be included in its AOC Operations Manual will be submitted as a part of his formal application package.

## **9.4 PHASE 2 - FORMAL APPLICATION PHASE**

It is recommended that the formal application by a prospective operator for an EMS be submitted at least 90 days before the proposed start-up date for maintenance operations, although the application should be submitted to the Authority as far in advance of the proposed start-up date as possible.

The GCAA project team will review the application to determine that it contains the required information and attachments. If there are omissions or errors, the formal application and all attachments will be returned with a letter outlining the reasons for its return. If the operator has a good understanding of the requirements, the formal application should be of sufficient quality to allow any omission, or open question to be resolved during the formal application meeting.

The formal application meeting should reinforce open communication and working relationships. The operator's key management personnel, more so his nominated maintenance management personnel should attend the formal application meeting. The purpose of this meeting is to discuss the formal application and resolve omissions, deficiencies, or open questions. Date conflicts must be resolved. Subsequent phases of the certification process will be fully discussed. The operator should seek clarification of any item or event that is not clearly understood. The GCAA project team should respond to any questions the applicant may have and should reinforce the certification process. Based upon the results of the meeting, the GCAA project team will determine the acceptability of the package, but the PM will not formally accept the application during the meeting. This delay allows the operator time to resolve any omissions, or any deficiencies discussed during the meeting.

The operator will be notified by letter stating whether the formal application is accepted or rejected. The Authority's acceptance of a formal application does not constitute approval or acceptance of individual attachments. These documents will be evaluated thoroughly during subsequent phases of the certification process. If, the formal application is not accepted, it will be returned with a written explanation of the reasons for its non-acceptance.

## **9.5 PHASE 3 - DOCUMENT EVALUATION PHASE**

- a. After the formal application has been accepted, the project team will begin a thorough evaluation of all the manuals and documents submitted by the operator. The project team will endeavour to complete these evaluations in accordance with the operator's schedule of events. If a manual or document is incomplete or deficient, or if non-compliance with the regulations or safe operating practices is detected, the manual or document will be returned for corrective action. If the manual or documents are satisfactory, they will be approved or accepted, as necessary. Approvals will be indicated by letter. Acceptance of information that does not require formal approval will be indicated by letter or by lack of the Authority's objection to the information.
- b. The complexity of the information must be addressed in the operator's manual and other documents depending on the complexity of the planned operation. The fully completed statement of compliance is the final evolution of the statement of compliance initially submitted with the formal application. The fully completed statement of compliance ensures each applicable regulatory requirement has been adequately addressed in the appropriate manual procedures.

## **9.6 PHASE 4 - DEMONSTRATION AND INSPECTION PHASE**

- a. An operator is required to demonstrate his ability to comply fully with the regulations before beginning any aircraft maintenance operations. These demonstrations include actual performance of maintenance activities while being observed by the project team. This includes on-site evaluations

of aircraft maintenance equipment, support facilities, technical records, technical stores, an actual maintenance activity, etc.

- b. During these demonstrations and inspections, the project team evaluates the effectiveness of the policies, methods, procedures and instructions as described in the operator's manual (MCM or EMS Procedure Manual, as applicable). Emphasis is placed on the maintenance operator's management effectiveness during this phase. Deficiencies will be brought to the attention of the operator and corrective action must be taken before the AOC Operations Specifications is amended to include the EMS.

## 9.7 PHASE 5 - CERTIFICATION PHASE

- a. After the demonstration and inspection phase is completed satisfactorily, the project team will carry out a review of the entire process from Phase 1 to 4 and ensure everything is in order, in place and properly filed. The project manager will then prepare a report for the Director Aviation Safety Regulation recommending that the EMS be added to the AOC holder's operations specifications. The operations specifications will be amended to include the authorisations, limitations, and provisions specific to the maintenance operations approved by the Authority for the operator's EMS. The operator must acknowledge, in writing, receipt of amended operations specifications.
- b. The AOC holder is responsible for continued compliance with the regulations, the authorisations, and provisions of its air operator certificate and operations specifications, as amended. Whenever the AOC holder's operation changes to include other types of aircraft, the operations specifications must also be amended accordingly in order for those aircraft to be maintained under the operator's EMS.
- c. The process for amending operating provisions is similar to the certification process. In some cases, it may be a less complex procedure depending on the subject of the amendment. The Authority is responsible for conducting periodic inspections of the AOC maintenance operation to ensure continued compliance with the regulations and safe maintenance practices.

## 9.8 EQUIVALENT MAINTENANCE SYSTEM MANUAL

- a. The equivalent maintenance system shall be equivalent to an AMO. Consequently, the operator must provide its maintenance personnel a manual containing procedures and necessary information to enable them to carry out the maintenance activities prescribed by the regulations.
- b. The operator may choose to establish its EMS procedures in an EMS Procedures Manual or include the procedures in its existing Maintenance Control Manual. In any case, the manual shall describe, in clear detail, information that explains the following:
  - (i) The organisation's EMS management structure. The structure shall include at least the following positions:
    - (A) Maintenance Coordinator;
    - (B) Director of Maintenance, Maintenance Manager or Chief Engineer; and
    - (C) Quality Manager or Quality Engineer.

***Note: The positions in (A) and (B) above may be held by a single person who has the appropriate qualifications and who is acceptable to the Authority.***
  - (ii) The organisation's maintenance capabilities;
  - (iii) The layout of the maintenance facility;
  - (iv) The Qualifications of its maintenance personnel (including training);

- (v) The availability of tools, special tools, materials, technical data;
- (vi) The necessary procedures to perform service, maintenance, inspection, repairs, and alterations necessary for release to service of the aircraft in accordance with pertinent GCAA regulatory requirements;
- (vii) Technical stores procedures to include the following:
  - (A) A quarantine store system/procedure for storage of unserviceable spares/components, including incoming and out-going spares/components and spares/components received without an approval tag, e.g. FAA 8130-3, JAA Form 1, etc.;
  - (B) A Bonded store system/procedure for storage of serviceable spares/components, the requisition and issue of spares to be used on aircraft,
  - (C) A "spares robbery" system and a system for establishing serviceability of spares removed from aircraft and entered into the bonded store.
  - (D) The types of parts approval tags/certificates that will be accepted by the operator.
  - (E) A system for security, and controlling and recording stores temperature and humidity.
- (viii) A system for keeping maintenance records, issue of Certificate of Release to Service (CRS) and Certificate of Maintenance Review.
- (ix) An independent quality system. The AOC may have a single quality system for its air operations and EMS, however the person(s) managing the quality system must be appropriately qualified and acceptable to the Authority;
- (x) A system or procedure to include the EMS under the operator's safety management system (SMS);
- (xi) Contracted AMO's that will be doing any maintenance for the operator; and
- (xii) Sample forms that will be used under the EMS.

## EXPLANATION OF APPENDICES IN THIS ADVISORY CIRCULAR

- a. Appendix 1 - Pre-Application Statement for a Part 9 Operator EMS.
- b. Appendix 2 Application form for an EMS.
- c. Appendix 3 Schedule of events.
- d. Appendix 4 Management biographical data form.
- e. Appendix 5 Certification flow chart.

**Approved by:**




Lt. Col. (Ret'd.) Egbert Field, A.A.  
Director General Civil Aviation  
**Guyana Civil Aviation Authority**



# APPENDIX: 1

FIRST PAGE OF FORM GCAA FO/051

	<b>PRE-APPLICATION STATEMENT FOR A PART 9 AIR OPERATOR EQUIVALENT MAINTENANCE SYSTEM</b>	<b>FORM No: GCAA FO/051</b>
<p>(TO BE COMPLETED BY AN APPLICANT FOR AN AOC OR HOLDER OF AN EXISTING AOC WHO WISHES TO CONDUCT ITS AIRCRAFT MAINTENANCE UNDER AN EQUIVALENT MAINTENANCE SYSTEM UNDER GARs PART 9)</p>		
<b>SECTION: 1A</b>		
<b>1. NAME AND MAILING ADDRESS OF COMPANY</b> (INCLUDE BUSINESS NAME IF DIFFERENT FROM COMPANY NAME)	<b>2. ADDRESS OF THE PRINCIPAL (MAIN) BASE WHERE MAINTENANCE OPERATIONS WILL BE CONDUCTED:</b>	
<b>3. PROPOSED START-UP DATE FOR EQUIVALENT MAINTENANCE SYSTEM</b>	<b>4. COMPANY CONTACT INFORMATION</b>  Tel. No: _____ Email: _____	
<b>5. MANAGEMENT AND KEY STAFF PERSONNEL</b>		
<b>NAME</b> (SURNAME/FIRST/MIDDLE)	<b>TITLE</b>	<b>TELEPHONE AND ADDRESS</b> (IF DIFFERENT FROM COMPANY)
a.		
b.		
c.		
d.		
e.		
f.		
<b>SECTION: 1B</b>		
<b>6. PROPOSED TYPE OF MAINTENANCE RATING(S)</b> (TICK [✓] APPROPRIATE BOX[ES]. REFERENCE GCARS SCHEDULE 5, 3.(7) (Note: Only Company aircraft shall be maintained by the approved Equivalent Maintenance System. This does not preclude the Air Operator from contracting out any of its aircraft maintenance to an external Maintenance Organisation approved by the Authority.)		
<b>AIRCRAFT (A)</b> <input type="checkbox"/> A1 – Aeroplane > 5700 kg <input type="checkbox"/> A2 – Aeroplane < 5700 kg <input type="checkbox"/> A3 – Rotorcraft	<b>ENGINE (B)</b> <input type="checkbox"/> B1 – Turbine <input type="checkbox"/> B2 – Piston <input type="checkbox"/> B3 – APU	<b>COMPONENTS (C)</b> <input type="checkbox"/> C1 _____ <input type="checkbox"/> C2 _____ <input type="checkbox"/> C3 _____ <input type="checkbox"/> C4 _____
<b>SPECIALISED SERVICES (D)</b> <input type="checkbox"/> D1 _____ <input type="checkbox"/> D2 _____ <input type="checkbox"/> D3 _____ <input type="checkbox"/> D4 _____		
<b>NOTES:</b>		
1. Component means a component other than a complete engine or auxiliary power unit. List the Components the Company desire to maintain under the Components (C) column.		
2. Specialised Services means as the name suggest, a Specialised Service, e.g. weighing of aircraft, non-destructive testing, battery charging/servicing/capacity checks, etc. List the Specialised Services the Company desire to conduct under the Specialised Services (D) column.		
<b>SECTION: 1C</b>		
<b>7. ADDITIONAL INFORMATION THAT PROVIDES A BETTER UNDERSTANDING OF THE PROPOSED EQUIVALENT SYSTEM OF MAINTENANCE</b> (ATTACH ADDITIONAL SHEETS, IF NECESSARY)		
<b>8. PROPOSED TRAINING OF MAINTENANCE STAFF</b> (IF MAINTENANCE STAFF ARE PRE-QUALIFIED – STATE QUALIFICATIONS (INCLUDING TYPE RATING[S], IF ANY) AND DATE SUCH TRAINING WAS DONE) (ATTACH ADDITIONAL SHEETS, IF NECESSARY)		
_____ (SIGNATURE)	_____ (DATE [DD/MM/YY])	_____ (NAME)
_____ (TITLE)		

**SECOND PAGE OF FORM GCAA FO/051**

<b>GCAA USE ONLY</b>			
<b>SECTION: 2</b> <b>(TO BE COMPLETED BY THE DIRECTOR GENERAL'S OFFICE)</b>			
<b>9.</b>	RECEIVED BY:		
	_____ (SIGNATURE)	_____ (DATE [DD/MM/YY])	_____ (NAME)                      _____ (TITLE)
<b>10.</b>	DATE FORWARDED TO DASR:	<b>11.</b>	FOR: (TICK [✓] APPROPRIATE BOX):  <input type="checkbox"/> ACTION <input type="checkbox"/> INFORMATION ONLY
<b>12.</b>	REMARKS:		
<b>SECTION: 3</b> <b>(TO BE COMPLETED BY THE DASR'S OFFICE)</b>			
<b>13.</b>	RECEIVED BY:		
	_____ (SIGNATURE)	_____ (DATE [DD/MM/YY])	_____ (NAME)                      _____ (TITLE)
<b>14.</b>	AOC HOLDER'S NAME:	<b>15.</b>	AIR OPERATOR CERTIFICATE NO:
<b>16.</b>	ASSIGNED PROJECT MANAGER:		
	_____ (SIGNATURE)	_____ (DATE [DD/MM/YY])	
<b>17.</b>	REMARKS:		

**INSTRUCTIONS FOR COMPLETING GCAA FORM No: GCAA/FO/051**

**PRE-APPLICATION STATEMENT FOR A PART 9 OPERATOR**

**EQUIVALENT MAINTENANCE SYSTEM**

*(THIS FORM IS TO BE COMPLETED BY AN AOC HOLDER WHO IS APPLYING FOR AN EQUIVALENT MAINTENANCE SYSTEM.)*

**SECTION: 1A - (AIR OPERATOR MUST COMPLETE THIS SECTION)**

**Block 1** – In this block, enter the company's official name and mailing address. Include any other business name if different from the company's name).

**Block 2** – In this block, the address entered shall be the physical location where the company primary operating activities are based. It is where the offices of management required by regulation are located. If the address is the same as Item 1, enter "same." Include secondary business addresses of operation and identify the type of operation conducted.

**Block 3** – In this block, enter the estimated commencement date of the equivalent maintenance system for the conduct of maintenance activities.

**Block 4** – In this block, enter the telephone number and email address of the accountable manager or the person the company selected to head their EMS certification team.

**Block 5** – In this block, enter the names, titles, and telephone numbers of operator's management personnel, including maintenance management personnel.

**SECTION: 1B - (AIR OPERATOR MUST COMPLETE THIS SECTION, AS APPROPRIATE)**

**Block 6** – In this block, the operator shall indicate the categories of aircraft, engines, component and specialised services to be maintained under the EMS. Tick and enter information that are only applicable.


**SECTION: 1C**

**Block 7** – In this block, enter any additional information that will provide the Authority with a better understanding of the EMS.

**Block 8** – In this block, enter information on maintenance staff pre-qualification and proposed training to be done by the operator. The operator representative shall affix in the appropriate area, his/her signature, the date, his/her name (in block capital) and title.

**SECTIONS 2 and 3 for GCAA use.**

**APPENDIX: 2**  
**SAMPLE GCAA FORM No: GCAA FO/052**  
**(APPLICATION FOR AN OPERATOR EQUIVALENT MAINTENANCE SYSTEM)**  
(First Page)

	<b>GUYANA CIVIL AVIATION AUTHORITY</b>	FORM No: GCAA FO/052
<b>APPLICATION FOR AN EQUIVALENT MAINTENANCE SYSTEM</b>		
<b>1.</b>	<u><b>OFFICIAL BUSINESS NAME, ADDRESS AND TELEPHONE NUMBER OF OPERATOR</b></u>	
<b>2.</b>	<u><b>ADDRESS AND DESCRIPTION OF FACILITIES FOR THE MAINTENANCE BASE</b></u>	
<b>3.</b>	<u><b>TITLE, NAME, BACKGROUND, QUALIFICATIONS AND EXPERIENCE OF KEY MANAGEMENT STAFF</b></u>	
<b>a.</b>	<b>Chief Executive (President and Accountable Manager):</b>	
<b>b.</b>	<b>Director of Operations:</b>	
<b>c.</b>	<b>Director of Maintenance/Maintenance Manager/Chief Engineer (Strike off appropriately):</b>	
<b>d.</b>	<b>Maintenance Coordinator (If different from the person in item c above):</b>	
<b>e.</b>	<b>Quality Manager:</b>	
<b>f.</b>	<b>Director of Training:</b>	
<b>g.</b>	<b>Director of Safety:</b>	

4. NUMBER BY TYPE OF AIRCRAFT TO BE MAINTAINED UNDER THE EMS  
(AIRCRAFT MUST BE THOSE ON THE OPERATOR'S OPERATIONS SPECIFICATIONS)

5. ARRANGEMENTS FOR MAINTENANCE AND INSPECTION TO BE CONTRACTED OUT, IF ANY

6. ARRANGEMENTS FOR MAINTENANCE TRAINING OF ALL MAINTENANCE PERSONNEL

7. DESIRED DATE FOR EMS TO COMMENCE

8. I APPLY FOR THE GRANT OF AN EQUIVALENT MAINTENANCE UNDER GARs PART 9 AS PART OF MY AIR OPERATOR  
CERTIFICATE AND THE ASSOCIATED OPERATIONS SPECIFICATIONS BASED ON THE INFORMATION PROVIDED IN THIS FORM:

\_\_\_\_\_  
NAME (PRINTED)

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
POSITION

\_\_\_\_\_  
DATE

**NOTES ON USE OF GCAA FORM No: GCAA FO/052**  
**(APPLICATION FOR AN EQUIVALENT MAINTENANCE SYSTEM)**

1. This Form is self-explanatory and does not require an explanation here.
2. When filling out this application form observe the following guidelines:
  - a. Use additional sheet(s) of paper if necessary.
  - b. Be accurate and as specific as possible. Enter all pertinent information as defined in each Block.
  - c. The application form should be completed and submitted to:

Director General Civil Aviation  
Guyana Civil Aviation Authority  
73 High Street, Kingston  
Georgetown, Guyana
  - d. The completed application form should reach the Authority at least ninety days (90) before the date on which operations are to commence. ***(NOTE: This does not mean that the Certification Process will be completed within 90 days of the application. The period of time for completion of the complete five-phase certification process shall be determined by circumstances arising during the process, including availability of inspectors.)***

**APPENDIX: 3**  
**AIR OPERATOR CERTIFICATION JOB AID AND SCHEDULE OF EVENTS**  
**FORM NO: GCAA/FO/037**  
 (First Page)

COMMERCIAL AIR TRANSPORT OPERATORS GARS PART 8 AND 9 JOB AID AND SCHEDULE OF EVENTS							FORM No: GCAA AC/FO/037
OFFICIAL NAME OF COMPANY				LOCATION – MAIN ADDRESS			
MAILING ADDRESS (IF DIFFERENT FROM LOCATION)							
				PRE-CERTIFICATION NUMBER:			
GCAA REF.	OPERATIONS INSPECTOR:	AIRWORTHINESS INSPECTOR:	AVIONICS INSPECTOR:	INSPECTOR INITIAL	DATE		REFERENCE
					RECEIVED / ACCOMPLISHED	RETURNED FOR CHANGES	
	<b>1. PRE-APPLICATION PHASE</b>						
	<b>A. Initial Orientation - Inspector</b>						
	1. Certification Advisory Circular No: GCAA/FO-001-R1 provided to applicant.						
	2. Prospective Operator's Pre-Assessment Statement (POPS) a. Forward to Director General						
	<b>B. Certification Team Designated</b>						
	PM	NAME	SPECIALTY				
<b>C. Conduct Pre-Application Meeting</b>							
1. Verify POPS Information							
2. Overview of Certification Process							
	3. Provide Certification Package Containing:						
	a. Certification Job Aid						
	b. Schedule of Events						
	c. Model Operations Specifications						
	d. Other applicable publications and documents						
4. Explain formal application submissions							
REMARKS:							

GCAA REF.	2. FORMAL APPLICATION PHASE	INSPECTOR INITIAL	DATE		REFERENCE
			RECEIVED/ ACCOMPLISHED	RETURNED FOR CHANGES	
	<b>A. Review Applicant's Submission</b>				
	1. Formal Application Form/Letter:				
	a. Full and Official Name (Legal)				
	b. Mailing Address				
	c. Primary Operating Location (Principal Operations/Maintenance Base)				
	d. Name and Address of Applicant's Agent for Service				
	e. Key Management Personnel Names				
	2. Formal Application Attachments:				
	a. Schedule of Events				
	b. Initial Compliance Statement				
	c. Company General Manuals:				
	(i) Operations Manual				
	(ii) Maintenance Control Manual				
	(iii) Maintenance Procedures Manual (if applicable)				
	(iv) Aircraft Maintenance Programme				
	d. Initial new hire training curricula (Crewmembers & Flt/Ops/Officers) Company Procedures Indoctrination Emergency Equip Drills Training Initial Flight and Ground Training				
	e. Management and Key Staff qualifications/resumes				
	f. Documents of Purchase/Contracts/ Lease(s)/ Letters of Intent				
	<b>B. Evaluation of GCAA Resources Based on Schedule of Events</b>				
<b>REMARKS:</b>					
	<b>C. Formal Application Meeting</b>				
	1. Schedule of Events: Date: _____ Time: _____				
	2. Discuss each Submission				
	3. Resolve Discrepancies/open Items				
	4. Review Certification Process				
	5. Review impact if Schedule of Events are not met				
	<b>D. Issue letter accepting/rejecting Formal Application</b>				
<b>REMARKS:</b>					



GCAA REF.	3. DOCUMENT EVALUATION PHASE	INSPECTOR INITIAL	DATE		REFERENCE
			RECEIVED/ ACCOMPLISHED	RETURNED FOR CHANGES	
	<b>A. Evaluate Applicable Training Programmes</b>				
	1. Training Curricula:				
	a. Company Procedures Indoctrination				
	b. Emergency Equipment Drills Training				
	c. Ground Training (Handling/Service/De-icing)				
	d. Flight Training				
	e. Recurrent Training				
	f. Transition/Upgrade Training				
	g. Differences Training				
	h. Security				
	i. Dangerous Goods				
	j. Check Airmen/Flight Instructor				
	k. Crew Resource Management				
	2. Flight Operations Officer Training				
<b>REMARKS:</b>					
	<b>B. Evaluate Management Personnel Qualifications</b>				
	1. Accountable Manager				
	2. Director of Operations				
	3. Director of Maintenance				
	4. Quality Manager (QM) [If only one QM for both Operations/Maintenance]				
	a. QM for Operations (if applicable)				
	b. QM for Maintenance (if applicable)				
	5. Chief Pilot				
	6. Director of Safety				
	7. Other				
	8. Evaluate Request for Deviation Letter (if applicable)				
<b>REMARKS:</b>					

## (Fourth Page)

GCAA REF.	3. DOCUMENT EVALUATION PHASE (CONTINUED)	INSPECTOR INITIAL	DATE		REFERENCE
			RECEIVED/ ACCOMPLISHED	RETURNED FOR CHANGES	
	<b>C. Evaluate Operator's Manual System</b>				
	1. Completed Operations Manual				
	a. Emergency exit plan				
	b. Carry-on Baggage plan				
	2. Completed Maintenance Control Manual				
	3. GCAA Approved Aeroplane Flight Manual				
	4. Aircraft Checklists				
	a. Normal				
	b. Abnormal				
	c. Emergency				
	5. Cabin Attendant Manual				
	6. Flight Supervision and Monitoring/Flight Following				
	7. Station/Facility Operations				
	8. Company Emergency Manual				
	9. Aerodrome Data & En Route Manual (Charts and Plates)				
	10. Aerodrome/Runway Analysis (Performance)				
	11. Minimum Equipment List (MEL)				
	a. MEL Management Programme				
	12. Configuration Deviation List				
	13. Maintenance Technical Manuals:				
	14. Fueling/Refueling/Defueling				
	15. Ground Servicing Manual				
	16. Mass and Balance Control Programme				
	17. Dangerous Goods				
	18. Security				
	19. Reliability Programme				
	20. Completed Continuous Airworthiness Maintenance Programme				
	21. Emergency Plan/Notification				
	22. Passenger Briefing Cards				
	<b>D. Other Evaluations</b>				
	1. Aircraft Lease				
	2. Maintenance Contracts/Agreements				
	3. Servicing Contracts/Agreements				
	4. Exemption/Deviation Requests/Justification				
	5. Plan for Emergency Evacuation Demonstration				
	6. Plan for Demonstration Flight				
	7. Final Compliance Statement				
	8. Initiate Specific Operating Provisions preparation				
	9. Training Contracts				
	10. De-icing/Anti Icing				
	11. Exit Row Seating				
<b>REMARKS:</b>					

GCAA REF.	4. DEMONSTRATION AND INSPECTION PHASE	INSPECTOR INITIAL	DATE		REFERENCE
			RECEIVED/ ACCOMPLISHED	RETURNED FOR CHANGES	
	<b>A. Evaluate Operator Conducting Training</b>				
	1. Training Facilities				
	2. Training Schedules				
	3. Flight Crewmember Training Evaluation:				
	a. Company Procedures Indoctrination				
	b. Emergency Equip. Drills Training				
	c. Ground Training				
	d. Flight Training				
	e. Differences Training				
	4. Check Airmen/Instructor				
	5. Cabin Crew:				
	a. Company Procedures Indoctrination				
	b. Emergency Equipment Drills Training				
	c. Ground Training				
	6. Crew Resource Management				
	7. Flight Supervision and Monitoring/Flight Following				
	8. Dangerous Goods Training:				
	a. Crewmembers				
	b. Ground Personnel				
	9. Security Training				
	10. Maintenance Training:				
	a. Director of Maintenance				
	b. Quality Manager				
	c. Quality System Personnel				
	<b>B. Testing/Certification</b>				
	1. Pilots				
	2. Flight Engineers				
	3. Flight Operations Officers				
	4. Cabin Attendants				
	<b>C. Aircraft Conformity Inspection</b>				
	<b>D. Main Operations Base</b>				
	<b>E. Main Maintenance Base</b>				
	<b>F. Station/Facilities (Operations)</b>				
	<b>G. Station/Facilities (Maintenance)</b>				
	<b>H. Flight Supervision and Monitoring/Flight Following</b>				
	<b>I. Recordkeeping Locations</b>				
	1. Crewmember:				
	a. Training				
	b. Flight & rest Times				
	c. Qualification				
	2. Maintenance:				
	a. Aircraft Records				
	b. Maintenance Personnel Training:				
	(i) Director of Maintenance				
	(ii) Quality Manager and Staff				
	(iii) Contract Employees				
	<b>J. Flight/Trip Records</b>				
	<b>K. Emergency Evacuation Demonstration</b>				
	<b>L. Ditching Demonstration</b>				
	<b>M. Demonstration Flight Evaluation</b>				
	<b>N. Proof of Economic Authority [State]</b>				
<b>REMARKS:</b>					


GCAA REF.	5. CERTIFICATION PHASE	INSPECTOR INITIAL	DATE		REFERENCE
			RECEIVED/ ACCOMPLISHED	RETURNED FOR CHANGES	
	A. Approve Specific Operating Provisions				
	B. Present Certificate and Operations Specifications				
REMARKS					
	C. Prepare Certification Report:				
	1. Assemble Report:				
	a. Formal Application Letter				
	b. Final Compliance Statement				
	c. Copy of Specific Operating Provisions				
	d. Copy of Certificate				
	e. Summary of Difficulties				
	2. Distribute Report				
REMARKS					
	D. Develop Post Certification Surveillance Programme				
	1. Within Geographic Area				
	2. Outside Geographic Area				
REMARKS:					

**INSTRUCTIONS FOR COMPLETING GCAA FORM No: GCAA FO/037**  
**AIR OPERATOR CERTIFICATION JOB AID AND SCHEDULE OF EVENTS**

- a. This Form is to be completed by an applicant for an Air Operator Certificate [AOC].
- b. In the case where an operator already holds an AOC and now wishes to maintain its aircraft under a Part 9 equivalent maintenance system, the operator shall fill in the information required on page 1 and only the maintenance information required on the other pages.
- c. This will be explained by the GCAA project team.

**APPENDIX: 4**  
**MANAGEMENT PERSONNEL BIOGRAPHICAL DATA**  
**GCAA FORM No: GCAA/ASR-G/001-R1**

First Page

	<b>MANAGEMENT PERSONNEL BIOGRAPHICAL DATA</b> <b>(TO BE COMPLETED BY THE NOMINEE)</b>	<b>FORM No:</b> <b>GCAA/ASR-G/001-R1</b>
<b>1. COMPANY NAME:</b> <div style="height: 80px; border: 1px solid black;"></div>	<b>2. COMPANY ADDRESS:</b> <div style="height: 80px; border: 1px solid black;"></div>	
<b>3. NAME OF NOMINEE (MANAGEMENT PERSON):</b> <div style="height: 30px; border: 1px solid black;"></div>	<b>4. NOMINATED MANAGEMENT POSITION/TITLE:</b> <div style="height: 30px; border: 1px solid black;"></div>	
<b>4a. "DETAILS OF QUALIFICATIONS" relevant to Item 4 above (Position). Complete attachment A (copy additional sheets as required).</b>		
<b>4b. "DETAILS OF WORK EXPERIENCE" relevant to Item 4 above (Position). Complete attachment B (copy additional sheets as required).</b>		
<b>5. STATUS (TICK APPROPRIATE BOX):</b> <input type="checkbox"/> PERMANENT <input type="checkbox"/> CONTRACTED FULL-TIME <input type="checkbox"/> CONTRACTED PART-TIME		
<b>6.</b> I, _____ hereby confirm that: <div style="text-align: center;">(PRINT NAME IN FULL)</div> <p>(1) I have not -</p> <p style="margin-left: 40px;">(a) held a certificate or aviation document issued by a civil aviation authority that was revoked or terminated within the previous five years by reason of criminal, fraudulent, improper action or insanity on my part; nor</p> <p style="margin-left: 40px;">(b) contributed materially to the revocation or suspension of an aviation document issued by a Civil Aviation Authority</p> <p>(2) The information provided on this form is true and correct to the best of my knowledge.</p> <div style="display: flex; justify-content: space-between; margin-top: 20px;"> <div style="width: 45%; text-align: center;"> _____  (SIGNATURE) </div> <div style="width: 45%; text-align: center;"> _____  (DATE) </div> </div>		
<b>7. FOR GCAA OFFICIAL USE ONLY</b>		
<b>RECEIVED BY:</b>		
_____ (PRINT NAME IN FULL)	_____ (POSITION/TITLE)	
_____ (SIGNATURE)	_____ (DATE)	
<b>Attach copies of certificates/proof of experience to this form in support of information supplied.</b>		

## Second Page

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### Third Page Page

[illegible]



**INSTRUCTIONS FOR COMPLETING GCAA FORM No: GCAA/ASR-G/001-R1**

**MANAGEMENT PERSONNEL BIOGRAPHICAL DATA**

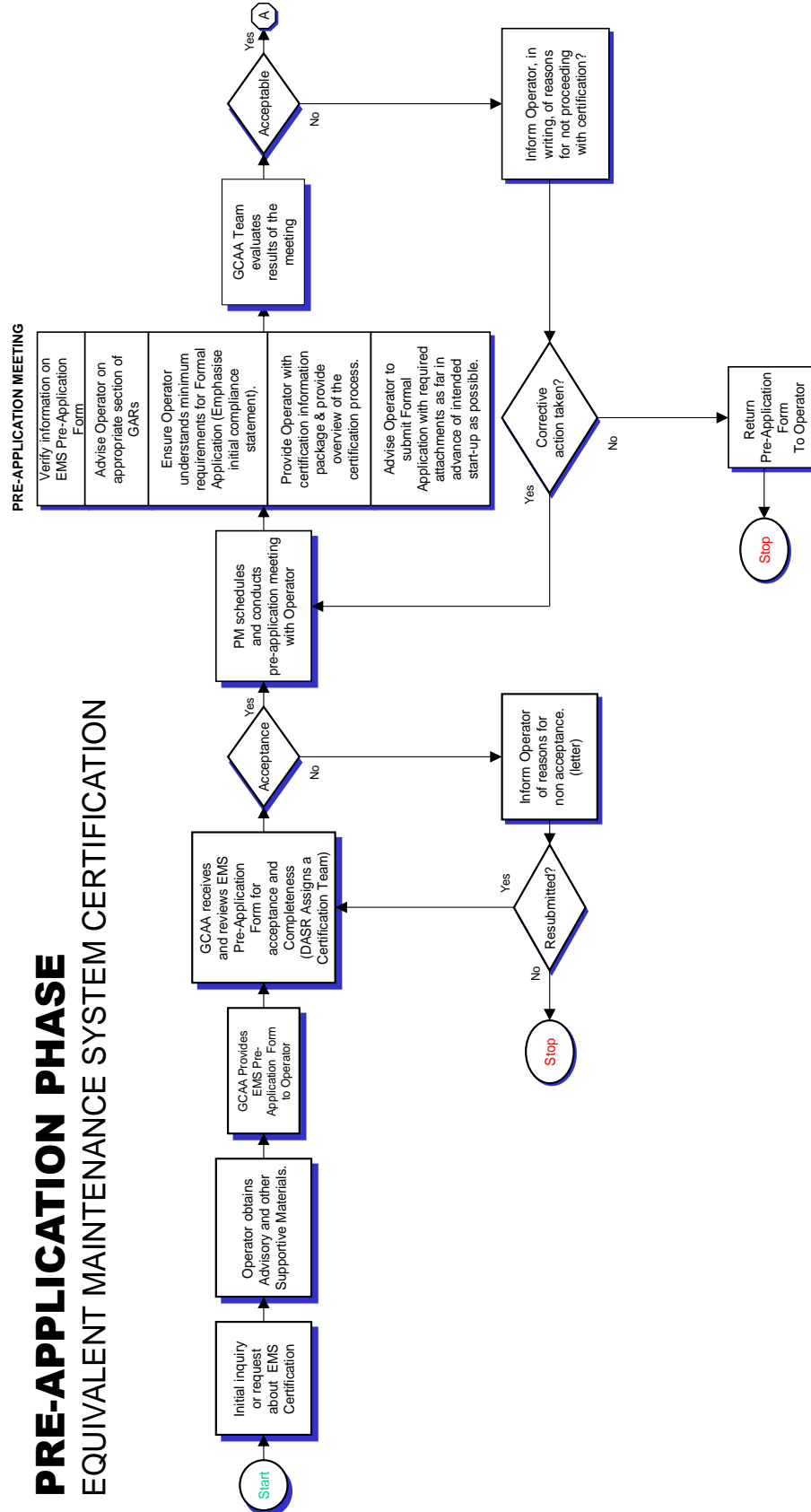
- a. This Form is self-explanatory. It is normally completed by an applicant for an air operator certificate.
- b. In the case where an operator who already holds an AOC and now wishes to maintain its aircraft under a Part 9 equivalent maintenance system, the operator shall fill in the information required by this form for all nominated maintenance management personnel, including quality and safety managers.

## APPENDIX: 5

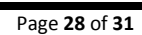
### AIR OPERATOR CERTIFICATE OPERATIONS SPECIFICATIONS

OPERATIONS SPECIFICATIONS (Subject to the approved conditions in the operations manual)				Form #: GCAA/FQ/042 R1
<b>ISSUING AUTHORITY CONTACT DETAILS<sup>1</sup></b>				
Telephone <sup>2</sup> : _____		Fax: _____		Email: _____
AOC#: _____		Operator Name <sup>3</sup> : _____		
		Issue Date <sup>4</sup> : _____		Expiry Date <sup>4.1</sup> : _____
Dba Trading Name: _____		Amended Date <sup>4.2</sup> : _____		Signature <sup>4.3</sup> : _____
Aircraft Model <sup>5</sup> :	MSN <sup>5.1</sup> :	Registration <sup>5.2</sup> :	Aircraft Model <sup>5</sup> :	MSN <sup>5.1</sup> : _____ Registration <sup>5.2</sup> :
Types of Operation:      Commercial Air Transportation <input type="checkbox"/> Passengers <input type="checkbox"/> Cargo <input type="checkbox"/> Other <sup>6</sup> : _____				
Area(s) of Operation <sup>7</sup> : _____				
Special Limitations <sup>8</sup> : _____				
SPECIAL APPROVAL	YES	NO	DESCRIPTION <sup>9</sup>	REMARKS
Dangerous Goods	<input type="checkbox"/>	<input type="checkbox"/>		
Low Visibility Operations				
Approach and Landing	<input type="checkbox"/>	<input type="checkbox"/>	CAT <sup>10</sup> : _____ RVR: _____ m DH: _____ ft	
Take-off	<input type="checkbox"/>	<input type="checkbox"/>	RVR <sup>11</sup> : _____ m	
Operational Credit(s):	<input type="checkbox"/>	<input type="checkbox"/>	<sup>12</sup>	
RVSM <sup>13</sup> <input type="checkbox"/> N/A	<input type="checkbox"/>	<input type="checkbox"/>		
EDTO <sup>14</sup> <input type="checkbox"/> N/A	<input type="checkbox"/>	<input type="checkbox"/>	Threshold Time <sup>15</sup> : _____ minutes Maximum Diversion Time <sup>15</sup> : _____ minutes	
AR Navigation Specifications for PBN Operations	<input type="checkbox"/>	<input type="checkbox"/>	<sup>16</sup>	
Continuing Airworthiness	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<sup>17</sup>	
EFB	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<sup>18</sup>	
Other <sup>19</sup>	<input type="checkbox"/>	<input type="checkbox"/>		

# **APPENDIX: 6** **EQUIVALENT MAINTENANCE SYSTEM FLOW** **CERTIFICATION PROCESS FLOW CHART** **PHASE 1 – PRE-APPLICATION PHASE**



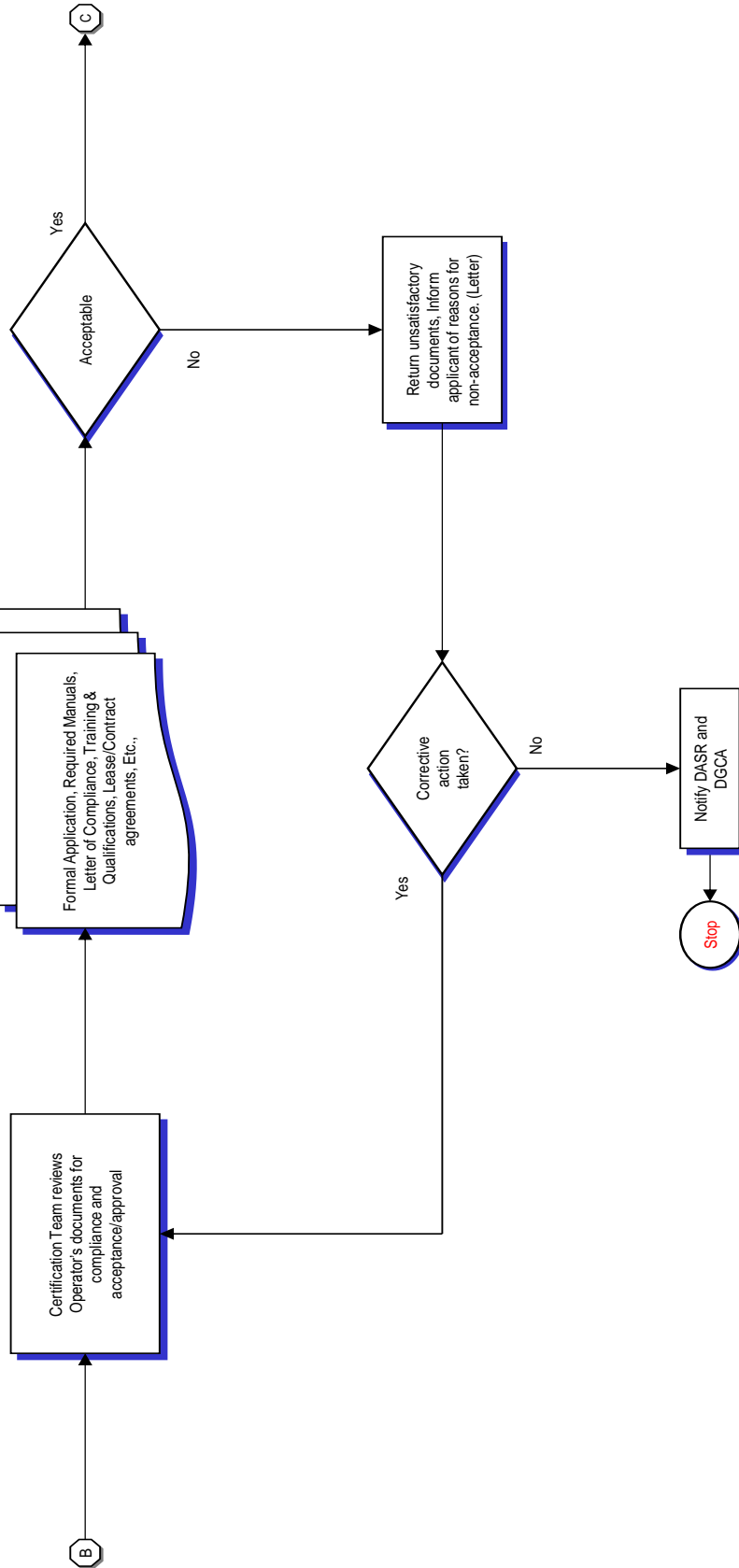
## FORMAL APPLICATION PHASE



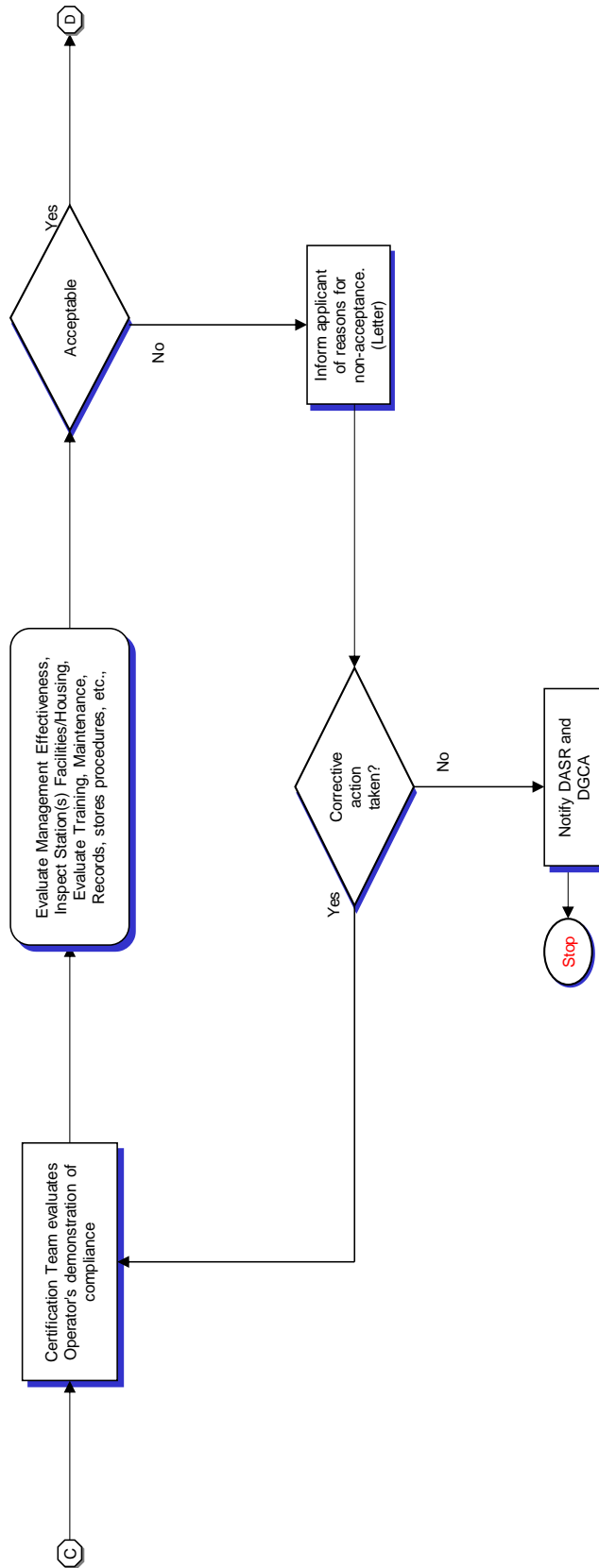
# DOCUMENT EVALUATION PHASE

## EQUIVALENT MAINTENANCE SYSTEM CERTIFICATION

FORMAL SUBMISSIONS  
(DETAILED REVIEW)



# **DEMONSTRATION AND INSPECTION PHASE** EQUIVALENT MAINTENANCE SYSTEM CERTIFICATION DEMONSTRATION AND INSPECTION EVALUATED IN THE FIELD



**CERTIFICATION PHASE**  
EQUIVALENT MAINTENANCE SYSTEM CERTIFICATION

