APPLICATION TO PROPOSE AN ALTMOC FOR OPERATOR

This form is to be used by operators for the submission of a proposal for an Alternative Means of Compliance to the Brunei DCA.

Please complete the form in **BLOCK CAPITALS** using black or dark blue ink. Once completed, this form, and all supporting documentation, should be sent to the Brunei DCA Flight Operations Section at:

***Flight Operations Section***

***Regulatory Division***

***Department of Civil Aviation***

***Ministry of Transport and Infocommunications***

***Brunei International Airport***

***Bandar Seri Begawan, BB2513***

***Brunei Darussalam***

Or via email at [flightops.regulatory@dca.gov.bn](mailto:flightops.regulatory@dca.gov.bn).

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| --- | --- |
| **Notifying Operator** | |
| 1. **Operator Name** | |
| 1. **Focal Point Contact Details** | |
| **Alternative Means of Compliance (AltMOC)** | |
| 1. **Regulatory reference** | |
| 1. **Subject** | |
| 1. **Regulation paragraph(s)** | |
| 1. **BAR AMC(s)**   **Yes  No Ref:** | |
| 1. **Summary of AltMOC** | |
| 1. **Additional information (if any)** | |
| 1. **Number and description of attachments** | |
| **Operator Date and Signature** | |
| 1. **Date** | **Signature** |

|  |  |
| --- | --- |
| **Brunei DCA Use Only**  Mark as applicable | |
| 1. I recommend,   **acceptance**  **acceptance with attached conditions**  **rejection**  of the proposed Alternative Means of Compliance | |
| 1. **Date** | **Signature**    Assigned Flight Operations Inspector |
| 1. I recommend,   **acceptance**  **acceptance with attached conditions**  **rejection**  of the proposed Alternative Means of Compliance | |
| 1. **Date** | **Signature**    Head of Flight Operations Section |

**APPENDIX 1: INSTRUCTIONS FOR COMPLETION**

1. State the name of the organisation / operator / AOC holder.
2. State the name and position of the person in the operator to whom questions on this AltMOC should be addressed. Include at least the e-mail address and phone number of the Focal Point.
3. State the Regulation that the AltMOC refers to (e.g. BAR 6 –Part ORO).
4. Briefly outline the issue that the AltMOC intends to address.
5. State the paragraph(s) of the regulations to which the AltMOC refers to (e.g. CAT.IDE.A.325).
6. State whether or not there is already an AMC on the same issue. If yes, include the reference(s) (e.g. AMC 1 CAT.IDE.A.325).
7. Summarise the AltMOC, describing how it proposes to achieve compliance with the regulations.
8. Give any additional relevant information.
9. Indicate the number of documents attached and include a brief description of each of them (e.g. organisation’s internal procedures, studies / safety assessments).
10. The form should be signed by the person who has been indicated as the Focal Point in 2.