



AIR OPERATOR CERTIFICATION													
PRE-APPLICATION PHASE – JOB AID AOC-001													
NAME OF APPLICANT:		PROJECTED CERTIFICATION PERIOD:											
ADDRESS:		BASE:											
Subject	Date received	Reference documents	Signature PM										
A. Prospective operators pre-assessment statement (POPS)													
B. Certification team designation Certification team designated (at least one operations/airworthiness inspector)													
<table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 50%;">NAME</th> <th style="width: 50%;">SPECIALTY</th> </tr> </thead> <tbody> <tr> <td>PM _____</td> <td>_____</td> </tr> <tr> <td>_____</td> <td>_____</td> </tr> <tr> <td>_____</td> <td>_____</td> </tr> <tr> <td>_____</td> <td>_____</td> </tr> </tbody> </table>	NAME	SPECIALTY	PM _____	_____	_____	_____	_____	_____	_____	_____			
NAME	SPECIALTY												
PM _____	_____												
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_____	_____												
C. Conduct pre-application meeting													
1. Verify POPS information													
2. Overview of certification process													
3. Provide application package:													
a) Certification job aids													
b) Schedule of events													
c) Example of operations specifications													
d) Applicable publications & documents													
4. Explain formal application submissions													
5. Financial information													
6. [State license for traffic rights]													
D. CCAA debriefing in preparation for formal application phase													
Remarks:													



Acknowledgements/Signature (as applicable)

Project Manager (PM)

ASI OPS

ASI AIR