



ARMA F2
RECORD OF APPROVAL TO OPERATE IN RMA RVSM/PBCS AIRSPACE

1. When a State of Registry approves or amends the approval of an operator/aircraft for RVSM operations, details of that approval must be recorded and sent to the ARMA without delay.

2. **PLEASE USE BLOCK CAPITALS**

State of Registry ¹ :	<table border="1"><tr><td>F</td><td>A</td></tr></table>	F	A				
F	A						
Name of Operator ² :	<table border="1"><tr><td>R</td><td>N</td><td>X</td></tr></table>	R	N	X			
R	N	X					
State of Operator ³ :	<table border="1"><tr><td> </td><td> </td></tr></table>						
Aircraft Type ⁴ :	<table border="1"><tr><td> </td><td> </td><td> </td><td> </td></tr></table>						
Aircraft Series ⁵ :	<table border="1"><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table>						
Manufacturers Serial No ⁶ :	<table border="1"><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table>						
Registration No ⁷ :	<table border="1"><tr><td>Z</td><td>S</td><td>X</td><td>X</td><td>X</td><td> </td></tr></table>	Z	S	X	X	X	
Z	S	X	X	X			
Mode S Address Code ⁸ :	<table border="1"><tr><td>0</td><td>0</td><td>B</td><td>9</td><td>8</td><td>A</td></tr></table>	0	0	B	9	8	A
0	0	B	9	8	A		
Airworthiness Approval ⁹ :	<table border="1"><tr><td>Y</td><td>E</td><td>S</td></tr></table>	Y	E	S			
Y	E	S					
Date Issued ¹⁰ :	<table border="1"><tr><td>2</td><td>6</td><td>1</td><td>0</td><td>0</td><td>8</td></tr></table>	2	6	1	0	0	8
2	6	1	0	0	8		
RVSM Approval ¹¹ :	<table border="1"><tr><td>Y</td><td>E</td><td>S</td></tr></table>	Y	E	S			
Y	E	S					
Date Issued ¹² :	<table border="1"><tr><td>1</td><td>1</td><td>1</td><td>1</td><td>2</td><td>0</td></tr></table>	1	1	1	1	2	0
1	1	1	1	2	0		
Date of Expiry ¹³ (If Applicable):	<table border="1"><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table>						
Approval to operate in PBCS Airspace¹⁴:	<table border="1"><tr><td>Y</td><td>E</td><td>S</td></tr></table>	Y	E	S			
Y	E	S					
Date PBCS Approval Issued¹⁵ :	<table border="1"><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table>						
Date RCP240 Authorization Issued¹⁶ :	<table border="1"><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table>						
Date RSP180 Authorization Issued¹⁷ :	<table border="1"><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table>						
Date of Expiry of PBCS Approval (if Any)¹⁸ :	<table border="1"><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table>						

Method of Compliance (Service Bulletin, STC etc) :

Remarks:

When complete, please mail to the following address.

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