



AIRCRAFT TYPE CERTIFICATE ACCEPTANCE DATA FORM

1. AIRCRAFT MANUFACTURER

(1) Name: -----

(2) Address: -----

2. PARTICULARS OF AIRCRAFT

(I) Type of Aircraft -----

(ii) Type of approval held/sought: -----

(iii) Category:-----

(iv) Flight Manual Approval (Ref/Date/Authority)

(v) Designated Max. No. of Crew: -----

(vi) Empty Weight: -----

(vii) Max. Ramp Weight: -----

(viii) Max. Take-off mass (MTO) -----

(ix) Max. Payload: -----

(x) No. of Passengers: -----

(xi) Designed Calendar Life span: -----

(xii) Designed Life span (fit hours/cycles) -----

3. PARTICULARS OF POWERPLANT

- (i) No. & Type of Engines -----
- (ii) Model No. -----
- (iii) Manufacturer: -----
- (iv) Take Off Thrust/HP: -----
- (v) Thrust to Weight Ratio: -----
- (vi) Time Between Overhaul: -----
- (vii) Propeller (if any) -----
- (i) No. and Type -----
- (ii) Model -----
- (iii) Manufacturer -----
- (viii) Specific Fuel Consumption: -----
- (ix) Engine Oil Capacity:-----

4. NO. FUEL TANKS AND CONFIGURATION: -----

	LEFT		RIGHT		CENTER	TOTAL
	MAIN	AUXILLARY	MAIN	AUXILLARY		
AMOUNT (IB/KG)						
DRAINABLE						
TRAPPED FUEL						
TOTAL						
TOTAL CAPACITY						

5. SPECIAL AVIONICS (MODEL,P/N, S/N)

- 1. Cockpit Voice Recorder: -----

2. Digital Flight Data Recorder: -----
3. HF Radio: -----
4. Ground Positioning System (GPS) -----
5. Ground Proximity Warning System (GPWS) -----
6. TCAS -----
7. Radio Altimeter: -----
8. ATC Transponder -----
9. Auto throttle: (Attach list) -----

6. PERFORMANCE DATA

1. Maximum Operating Speed Sea Level -----
 20,000 ft. -----
 25,000 ft. -----
2. Initial Cruise Altitude (I.S.A condition): -----
3. Final Cruise Altitude: -----
4. Maximum Operating Altitude: -----
5. Long Range Cruise Speed Mach No. -----
6. Normal Cruise Speed Mach No. -----
7. Take-off Distance -----
8. Landing Distance: -----
9. All Engines Rate of climb (max T/O Weight) -----
10. Endurance (@ Max. payload) -----

INSPECTOR REMARKS:-----

Signature:----- Date:-----

Inspector's Name & ASI No.-----

FOR OFFICIAL USE.

CHIEF OF AIRWORTHINESS: - REMARKS AND RECOMMENDATION REMARKS:

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I HEREBY **APPROVAL** / **NOT APPROVED** THE RECOMMENDATIONS OF THE INSPECTOR ABOVE

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Chief of airworthiness Name & ASI #

Signature

Date