## Application to Operate ACAS (TCAS) within the United Kingdom



## National IFF/SSR Policy Board



1. GENERAL DETAILS	
Aircraft Registration/Tail Number:	
Name of Organisation/Individual:	
Address:	
	Post Code:
Cease Transmission Name: Cease Transmission Tel:	
2. OPERATIONAL DETAILS	
Permanent / Temporary*	FIXED / ROTARY*
Airfield (Normally) Operated From:	L
Dates of Operation, from:	to:
Interrogator is for CONTINUOUS / OCCASION use (for Occasional please provide times	· ·
Purpose: EMERGENCY SERVICES / COMME	RCIAL / PRIVATE / LOW LEVEL AERIAL WORK / OTHER*
Details of Other Purpose:	
Application is for a NEW / AMENDMENT TO Previous certificate number (if applicable	
3. TECHNICAL DETAILS (NOTE 2) Aircraft	
Aircraft Manufacturer:	Model/Type:
ACAS	
ACAS Equipment Manufacturer:	Model/Type:
Peak Output Power: dBW	Estimated Cable Loss: dB
Transponder	
Transponder Equipment Manufacturer:	Model/Type:
Antenna	
Antenna Manufacturer:	Model:
Are the Antenna Horizontal and Vertical F	Radiation Pattern attached? YES / NO*
Mode S	
Does the ACAS equipment make Mode	S interrogations? YES / NO*
Is the Transponder equipment Mode S?	Yes / No*
Mode S ICAO 24-bit address:	(hex)

## **4. CONSENT DETAILS**

We hereby undertake to operate this interrogator only under the conditions laid down by the National IFF/SSR Policy Board, and confirm that any proposed change to the technical or operating characteristics of the system will be notified immediately.

Signed	Date:
Name:	For and on behalf of:
Telephone:	E-mail:

- **NOTE 1:** All civil interrogators shall comply with the standards and recommendations of Annex 10 to the Convention on International Civil Aviation Volume IV, unless specifically stated otherwise within this document.
- **NOTE 2:** ACAS II (TCAS II) equipment compliant with ICAO SARPS and those ACAS I (TCAS I) equipments listed in Annex J to CAP 761, have a generic approval and individual application is not necessary.

<sup>\*</sup>Delete as appropriate