

## Checklist for SFOC – RPAS – CAR 903.01(c)

### Operation of a RPAS by a foreign operator or pilot – Basic and Advanced Operations

<b>N° ATS :</b>	<b>N° NACIS:</b>	<b>Date Received :</b>	<b>Date</b>
<b>Processed by:</b>			

REQUIREMENTS				
<b>A – SFOC Application Form <a href="#">26-0835</a></b>	Yes	No		
1. Completed, properly filled out and signed.	<input type="checkbox"/>	<input type="checkbox"/>		
<b>B – General Requirements for Basic and Advanced Operations.</b>	Yes	No	Additional information	
2. Provide copy of a valid Passport (of the persons detailed on the SFOC application form).	<input type="checkbox"/>	<input type="checkbox"/>		
3. Provide proof of completion of <a href="#">TP15263</a> training from a <a href="#">self-declared Canadian training provider</a>	<input type="checkbox"/>	<input type="checkbox"/>		
4. Provide proof of registration from the originating Civil Aviation Authority or confirmation the RPAS is not registered internationally.	<input type="checkbox"/>	<input type="checkbox"/>		
5. Confirmation that CARs <a href="#">900.06</a> and <a href="#">901.01 - 901.59</a> have been read, reviewed, and are understood.	<input type="checkbox"/>	<input type="checkbox"/>		
6. As per <a href="#">903.02 (f)</a> , confirm the RPAS has not been modified from the manufacturer original design. If not or if the RPA is 'Home-Built', provide the manufacturer and model of the system, including three-view drawings or photographs of the aircraft and a complete description of the aircraft, including performance, operating limitations and equipment.	<input type="checkbox"/>	<input type="checkbox"/>		
7. As per <a href="#">903.02 (g)</a> , confirm the Site Survey/Safety Plan process is in place and will be completed prior to each flight, as specified in <a href="#">901.27</a> .	<input type="checkbox"/>	<input type="checkbox"/>		
8. As per <a href="#">903.02 (h)</a> , confirm there is an emergency contingency plan in place, an emergency response plan, etc.	<input type="checkbox"/>	<input type="checkbox"/>		
9. As per <a href="#">903.02 (i)</a> and (n), confirm there are normal and emergency procedures in place as per <a href="#">901.23</a> .	<input type="checkbox"/>	<input type="checkbox"/>		
10. As per <a href="#">903.02 (j)</a> , provide names, certificates, licenses, permits and qualifications of additional crew members, if applicable.	<input type="checkbox"/>	<input type="checkbox"/>		
11. AS per <a href="#">903.02 (k)</a> , confirm RPAS maintenance and serviceability will be as per <a href="#">901.29</a> and <a href="#">901.48(1)(b)</a> .	<input type="checkbox"/>	<input type="checkbox"/>		
12. As per <a href="#">903.02 (l)</a> , confirm the RPAS will be operated in weather conditions that are in accordance to <a href="#">901.34</a> .	<input type="checkbox"/>	<input type="checkbox"/>		
13. As per <a href="#">903.02 (m)</a> , confirm the RPAS will be operated with regard to separation and collision avoidance as per <a href="#">901.15</a> , <a href="#">901.16</a> , <a href="#">901.17</a> , and <a href="#">901.18</a> .	<input type="checkbox"/>	<input type="checkbox"/>		
<b>C – Additional Requirements for Advanced Operations</b>	Yes	No	N/A	Additional information
14. Provide Proof of appointment for a Flight Review with a Flight Reviewer authorized by the Minister. <b>Note:</b> For Advanced Operations, all Pilots will require proof of completion of a Flight Review conducted by a Flight Reviewer authorized by the Minister, prior to any operations being conducted.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
15. As per <a href="#">903.02 (o)</a> , provide a description of air traffic control services coordination, if applicable (Class C, D, E and F) and in accordance to <a href="#">901.71-901.73</a> . If in uncontrolled airspace (Class G), in accordance with <a href="#">901.14</a> and <a href="#">901.15</a> .	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
16. Confirmation that <a href="#">901.62 - 901.79</a> (Advanced operations) have been read, reviewed, and are understood.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

17. As per 901.76 (1), confirm that the RPAS meets <a href="#">901.69 (1) (a-c)</a> if applicable.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>D – Additional Documents (if available)</b>	<b>Yes</b>	<b>No</b>	<b>Additional information</b>	
18. Proof of pilot certification from home country to operate RPAS	<input type="checkbox"/>	<input type="checkbox"/>		
19. Does the RPAS operator has an Operating Manual (OM) for its RPAS operations?	<input type="checkbox"/>	<input type="checkbox"/>		
20. Does the RPAS operator have Standard Operating Procedures (SOPs) for its RPAS operations?	<input type="checkbox"/>	<input type="checkbox"/>		
21. Does the RPAS operator have a Training Manual for the crew (Pilots, VOs, POs, Maintainers, etc.) for its RPAS operations?	<input type="checkbox"/>	<input type="checkbox"/>		
22. Does the RPAS operator have a Maintenance Manual from the manufacturer for the RPAS?	<input type="checkbox"/>	<input type="checkbox"/>		

Applicant's comments:

Inspector comments:

FOR THE DEPARTMENT OF TRANSPORT USE ONLY		
Actions to be taken by:	Name and Position	Date
SFOC prepared by:		Date
SFOC sent to the applicant by:		Date