

AIR OPERATOR CERTIFICATE

(Approval schedule for air transport operators)

Types of operation: Commercial air transport (CAT) Passengers; Cargo;
 Other: **Emergency Medical Service EMS**

	State of the Operator: Denmark	
	Issuing Authority: Danish Transport Authority	
AOC Approval ref.: DK.AOC.058	Operator Name: FlexFlight ApS Operator address: Lufthavnsvej 50 4000 Roskilde Denmark Telephone: +45 45807059 E-mail: Info@flexflight.dk	Operational Points of Contact: • Ran Piontek, Telephone: 01-SEP-2014, E-mail: ran@flexflight.dk Contact details, at which operational management can be contacted without undue delay, are listed in: Operational Manual Part A, Chapter 1.

This certificate certifies that FlexFlight ApS is authorised to perform commercial air operations, as defined in the attached operations specifications, in accordance with the operations manual, Annex IV to Regulation (EC) No 216/2008 and its Implementing Rules.

Date of issue:
28-OKT-2014

Name and Signature:
Per Schmock
 Title: Head of Division

OPERATIONS SPECIFICATIONS

(subject to the approved conditions in the operations manual)

Issuing Authority Contact Details:
Telephone: +45 7221 8800
E-mail: info@trafikstyrelsen.dk

AOC: **DK.AOC.058** Operator Name: **FlexFlight ApS**

Date of issue:
28-OKT-2014

Signature: 
Palle Behrens Larsen



Operations specifications:

Aircraft model: C550
Registration marks: G-IBZA, OY-EVO

Commercial operations: Cargo
 Passengers
 Emergency Medical Service EMS - Applies to: OY-EVO

Area of operation: ICAO World wide

Special Limitations:

Specific approvals:	Yes	No	Specification	Remarks
Dangerous goods	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
Low visibility operations				
Take-off	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
Approach and landing	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
RVSM <input type="checkbox"/> N/A	<input checked="" type="checkbox"/>	<input type="checkbox"/>	ICAO EUR, NAT	
ETOPS <input type="checkbox"/> N/A	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
Navigation specifications for PBN operations	<input checked="" type="checkbox"/>	<input type="checkbox"/>	RNAV 1	Applies to: G-IBZA
Minimum navigation performance specification	<input checked="" type="checkbox"/>	<input type="checkbox"/>	ICAO NAT ICAO NAT, Restricted to special routes not requiring long range equipment and to special routes requiring one fully operational long range system	Applies to: OY-EVO Applies to: G-IBZA
Helicopter operations with the aid of night vision imaging systems	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
Helicopter hoist operations	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
Helicopter emergency medical service operations	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
Cabin crew training	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
Issue of CC attestation	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
Continuing airworthiness	<input checked="" type="checkbox"/>	<input type="checkbox"/>	DK.MG.0058, FlexFlight ApS	
Others				