

**U.S. DEPARTMENT OF TRANSPORTATION  
FEDERAL AVIATION ADMINISTRATION -- FLIGHT STANDARDS SERVICE  
SPECIAL INSTRUMENT APPROACH PROCEDURE -- FLIGHT STANDARDS SERVICE**

Bearings, headings, courses, and radials are magnetic. Elevations and altitudes are in feet, MSL, except HAT, HAA, TCH, and RA. Altitudes are minimum altitudes unless otherwise indicated. Ceilings are in feet above airport elevation. Distances are in nautical miles unless otherwise indicated, except visibilities which are in statute miles or in feet RVR.

If an instrument approach procedure of the above type is conducted at the below named airport, it shall be conducted in accordance with a charted instrument approach procedure predicated on the specifications contained herein, unless an approach is conducted in accordance with a different procedure for such airport authorized by the Administrator. Minimum altitudes shall correspond with those established for en route operation in the particular area or as set forth below.

TERMINAL ROUTES				MISSED APPROACH
FROM	TO	COURSE AND DISTANCE	ALTITUDE	MAP:

1. PT ____ SIDE OF COURSE _____ OUTBOUND _____ FT WITHIN ____ MILES OF _____ (IAF)	ADDITIONAL FLIGHT DATA:
2. _____	
3. FAC: _____ FAF: _____ DIST FAF TO MAP: _____ THLD: _____	
4. MIN. ALT: _____	
5. DIST TO THLD FROM OM: _____ MM: _____ IM: _____ 150 HAT: _____ 100 HAT: _____ GS ANT: _____	
6. MIN GS INCPT: _____ GS ALT AT: _____ OM: _____ MM: _____ IM: _____	
7. GS ANGLE: _____ TCH: _____	
8. MSA FROM: _____	
MAG VAR: _____ EPOCH YEAR: _____	

MINIMUMS																
TAKEOFF:	STANDARD	SEE NOTES					ALTERNATE: N A									
CATEGORY =====>	A			B			C			D			E			
	DH/MDA	VIS	HAT/HAA	DH/MDA	VIS	HAT/HAA	DH/MDA	VIS	HAT/HAA	DH/MDA	VIS	HAT/HAA	DH/MDA	VIS	HAT/HAA	

NOTES:

CITY AND STATE	ELEVATION: _____ TDZE: _____	FACILITY IDENTIFIER: _____	PROCEDURE NO. / AMDT NO. / EFFECTIVE DATE: _____	SUP: _____
	AIRPORT NAME: _____			AMDT: _____
				DATED: _____

NOTES CONTINUED:

AIR CARRIER NOTES:

The procedure on the other side and the foregoing data are hereby:

SUBMITTED BY

NAME:	COMPANY	DATE:
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FLIGHT CHECKED BY

NAME:	FIFO	DATE:
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DEVELOPED BY

NAME:	NFPO	DATE:
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RECOMMENDED BY

NAME:	MANAGER	NFPO	DATE:
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APPROVED BY

NAME:	AFS-400	DATE:
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OPERATIONS SPECIFICATIONS -- AIRPORT

\_\_\_\_\_ holding Air Carrier Operating Certificate No. \_\_\_\_\_ hereby acknowledges receipt of Operations Specifications to operate into and out of the airport named on the other side as a  Regular,  Refueling,  Alternate,  Provisional for \_\_\_\_\_ airport with the following type aircraft:

Unless otherwise authorized in the Operations Specifications - Airport, an instrument approach of this type shall be conducted in accordance with the procedure specified on the other side and the air carrier minimums specified above with the following exceptions:

DATE: \_\_\_\_\_ RECEIVED FOR THE AIR CARRIER BY: \_\_\_\_\_ TITLE: \_\_\_\_\_  
AMENDMENT NO. \_\_\_\_\_ SIGNATURE

BY DIRECTION OF THE ADMINISTRATOR \_\_\_\_\_ SIGNATURE TITLE  
EFFECTIVE DATE: \_\_\_\_\_