
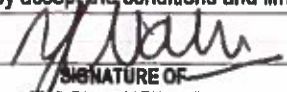


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 CIVIL AVIATION AUTHORITY OF BOTSWANA	<i>Section/division</i>	AIRWORTHINESS	
	NOTICE		
	<p>This document is issued as a supplement to the display certificate issued to this AMO.</p> <p>The authorizations contained within this document represent the complete authorizations granted to this AMO. No other maintenance functions are authorized.</p> <p>This document must be presented upon the request of the authorities of any State.</p>		
	<i>Physical address</i>	Plot 61920, Letsema Office Park, Gaborone, Botswana	
<i>Postal address:</i>	P.O Box 250, Gaborone	<i>Website:</i> www.caab.co.bw	
OPERATIONS SPECIFICATIONS FOR AIRCRAFT MAINTENANCE ORGANISATIONS			

Name of Organization	EAST COAST AVIATION (Pty) Ltd			
Approval Number	B/IA/F148			
PART A	TABLE OF CONTENTS, LIST OF EFFECTIVE PAGES & DATE, AND RATINGS AUTHORITY			
Table of Contents	List of Effective Pages	Effective Date	Authorized	Unauthorized
Table of Contents, LEP's & Rating authority	Page 1	31/10/2019		
Definitions and abbreviations	Page 2	31/10/2019		
Airframe Ratings	Page 3	31/10/2019	Yes	
Powerplant Ratings	Page 4	31/10/2019	Yes	
Propeller Ratings	Page 5	31/10/2019	Yes	
Avionics/Radio Ratings	Page 6	31/10/2019	Yes	
Instruments Ratings	Page 7	31/10/2019	Yes	
Computer systems Ratings	Page 8	31/10/2019	Yes	
Accessory Ratings	Page 9	31/10/2019	Yes	
Special Processes	Page 10	31/10/2019	NO	CAAB
Exemption and deviation Authority	Page 11	31/10/2019	NO	
Satellite Facilities & Line station Ratings	Page 12	31/10/2019	NO	
Page left blank intentionally	Page 13	31/10/2019	N/A	
(a)	These operations specifications are issued as part of this Approved Maintenance Organization Certificate, and are in effect as of the Effective Date.			
(b)	The signatures below indicates acceptance of these operations specifications by the AMO, and confirmation to abide and comply with the limitations imposed by them. The Chief Executive Officer of CAAB reserves the right to amend, revoke and alter these Specifications at any given time should circumstances warrant such.			
I hereby accept the conditions and limitations set forth in this approval as stated and contained in this paragraph.				
	NIEL WARREN		8/11/19	
SIGNATURE OF AMO REPRESENTATIVE	NAME IN BLOCK LETTERS		DATE	
JOB TITLE	Accountable Manager			

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PART B	Definitions and Abbreviations
<p>Unless otherwise defined in these operation specifications provisions, all words, phrases, definitions, and abbreviations have identical meanings to those used in the Botswana Civil Aviation Regulations and Botswana Civil Aviation Act, as amended. Additionally, the definitions listed below are applicable to operations conducted in accordance with these operations specifications provisions.</p>	
AMO	Aircraft Maintenance Organization
CAAB	Civil Aviation Authority of Botswana
BCARs	Botswana Civil Aviation Regulations
MPM	Maintenance Procedures Manual
Certificate Holder	In these operation specifications provisions the term "certificate holder" shall mean the holder of an aircraft maintenance organization certificate, issued in terms of Civil Aviation Regulations of 2012 as amended.
Rating	Means an authorization entered on or associated with an AMO approval and forming part of such approval, stating special conditions, privileges or limitations relating to such approval.
Limited Rating	Specialized maintenance requiring equipment and skills not ordinarily found in an approved maintenance organization with ratings as specified in BCARs AMO regulation 11
Maintenance	Means all work done in accordance with manufacturers' recommendations and approved maintenance schedules and include inspection, adjustment, replacement, rectification, repair, modification, overhaul, manufacturing and testing.
Exemption Authority	An authorization that permits an alternate means of compliance with BCARs. The deviation authority must meet the procedural requirements of BCARs (AMO) Reg. Part VII.
Limitation	A restriction imposed on the corresponding rating based on the AMO capability.
Capability List	A document compiled by the AMO and approved by the CAAB, which details a comprehensive list of all the components/equipment that the AMO is capable of maintaining.
Special processes (Specialized Services)	A set of interrelated or interacting activities which transforms inputs into outputs. Examples are: NDT, Electro Plating, Plasma Spraying, etc.
Satellite Facility	means any facility used for the performance of maintenance under BCARs approval but is located at another location than the principal place of business (main base) but is an integral part of the organization
Line Station	For the purpose of this document, means any maintenance facility that is utilized to perform any action that is mandatory, or is required to be performed on an aircraft for the purposes of a turn around, or a route check, or a transit check and is limited to defects rectification repairable by replacement of line replaceable units.



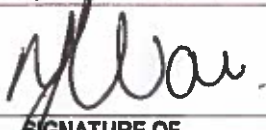
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PART C	AIRFRAME RATINGS		
CLASS	MANUFACTURER	MAKE/MODEL	LIMITATIONS
1	Robinson Helicopter	R22 Series R44 Series	Full Release on Scheduled & non-scheduled maintenance, Repairs, Modifications and Inspections as per Capability List
1	Bell Helicopter	206 Series 407 Series	Full Release on Scheduled & non-scheduled maintenance, Repairs, Modifications and Inspections as per Capability List
1	Cessna	150 Series 152 Series 172 Series 177 Series 182 Series 206 Series 207 Series 210 Series	Full Release on Scheduled & non-scheduled maintenance, Repairs, Modifications and Inspections as per Capability List
1	Piper	PA-28-180 Series	Full Release on Scheduled & non-scheduled maintenance, Repairs, Modifications and Inspections as per Capability List

I hereby accept the conditions and limitations set forth in this approval as stated and contained in this paragraph.

	NIEL WARREN	8/11/19
SIGNATURE OF AND REPRESENTATIVE	NAME IN BLOCK LETTERS	DATE

JOB TITLE Accountable Manager



I hereby approve the Operations Specifications contained in this paragraph.

Date approval is effective:	2 0 1 9 1 0 3 1 y y y y m m d d	Revision Number:	Original
	CHRISTOPHER FERGUSON	31 OCTOBER 2019	
SIGNATURE OF DIRECTOR AVIATION SAFETY OR HIS/HER DESIGNATE	NAME IN BLOCK LETTERS	DATE	

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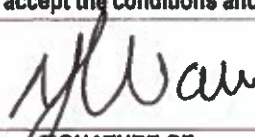


PART D	POWERPLANT RATINGS		
CLASS	MANUFACTURER	MAKE/MODEL	LIMITATIONS
1 & 2	Teledyne Continental	IO-470 Series	Full Release on Scheduled and non-scheduled maintenance, modifications and inspections as per Capability List
		IO-520 Series	
		IO-560 Series	
		O-200 Series	
		O-470 Series	
1 & 2	Textron Lycoming	O-520 Series	Full Release on Scheduled and non-scheduled maintenance, modifications and inspections as per Capability List
		IO-320 Series	
		IO-360 Series	
		IO-540 Series	
		O-235 Series	
		O-320 Series	
3	Pratt & Whitney	PT6A Series	Full Release on Scheduled and non-scheduled maintenance, modifications and inspections as per Capability List
	Rolls Royce	250 Series	
3	Allison	250 Series	
I hereby accept the conditions and limitations set forth in this approval as stated and contained in this paragraph.			
		NIEL WARREN	8/11/19
SIGNATURE OF AMO REPRESENTATIVE		NAME IN BLOCK LETTERS	DATE
JOB TITLE		Accountable Manager	
I hereby approve the Operations Specifications contained in this paragraph.			
Date approval is effective:		2 0 1 9 1 0 3 1 y y y y m m d d	Revision Number: Original
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PART G	INSTRUMENTS RATINGS		
CLASS	MANUFACTURER	MAKE/MODEL	LIMITATIONS
1	AS APPLICABLE	As applicable	Replacement, Repairs, Inspections and Servicing as applicable and Capability List
2	AS APPLICABLE	As applicable	Replacement, Repairs, Inspections and Servicing as applicable and Capability List
3	AS APPLICABLE	As applicable	Replacement, Repairs, Inspections and Servicing as applicable and Capability List
4	AS APPLICABLE	As applicable	Replacement, Repairs, Inspections and Servicing as applicable and Capability List
<p>I hereby accept the conditions and limitations set forth in this approval as stated and contained in this paragraph.</p>			
 SIGNATURE OF AMO REPRESENTATIVE	NIEL WARREN NAME IN BLOCK LETTERS	8/11/19 DATE	
JOB TITLE	Accountable Manager		
<p>I hereby approve the Operations Specifications contained in this paragraph.</p>			
Date approval is effective:	2 0 1 9 1 0 3 1 y y y y m m d d	Revision Number:	Original
 SIGNATURE OF DIRECTOR AVIATION SAFETY OR HIS/HER DESIGNATE	CHRISTOPHER FERGUSON NAME IN BLOCK LETTERS	31 OCTOBER 2019 DATE	
			

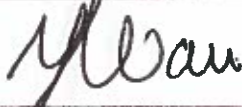
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PART H	COMPUTER SYSTEMS RATINGS		
CLASS	MANUFACTURER	MAKE/MODEL	LIMITATIONS
1	AS APPLICABLE	As applicable	Replacement, Repairs, Inspections and Servicing as applicable and Capability List
2	AS APPLICABLE	As applicable	Replacement, Repairs, Inspections and Servicing as applicable and Capability List
3	AS APPLICABLE	As applicable	Replacement, Repairs, Inspections and Servicing as applicable and Capability List

I hereby accept the conditions and limitations set forth in this approval as stated and contained in this paragraph.

	NIEL WARREN	8/11/19
SIGNATURE OF AMO REPRESENTATIVE	NAME IN BLOCK LETTERS	DATE

JOB TITLE Accountable Manager

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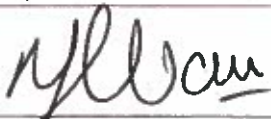
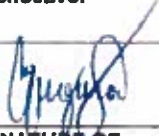

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	CHRISTOPHER FERGUSON	31 OCTOBER 2019																	
SIGNATURE OF DIRECTOR AVIATION SAFETY OR HIS/HER DESIGNATE	NAME IN BLOCK LETTERS	DATE																	



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PART I	ACCESSORY RATINGS		
CLASS	MANUFACTURER	MAKE/MODEL	LIMITATIONS
1	AS APPLICABLE	As applicable	Replacement, Repairs, Inspections and Servicing as applicable and Capability List
2	AS APPLICABLE	As applicable	Replacement, Repairs, Inspections and Servicing as applicable and Capability List
3	AS APPLICABLE	As applicable	Replacement, Repairs, Inspections and Servicing as applicable and Capability List
4	AS APPLICABLE	As applicable	Replacement, Repairs, Inspections and Servicing as applicable and Capability List
I hereby accept the conditions and limitations set forth in this approval as stated and contained in this paragraph.			
		NIEL WARREN	8/11/19
SIGNATURE OF AND REPRESENTATIVE		NAME IN BLOCK LETTERS	DATE
JOB TITLE		Accountable Manager	
I hereby approve the Operations Specifications contained in this paragraph.			
Date approval is effective:		2 0 1 9 1 0 3 1 y y y y m m d d	Revision Number: Original
		CHRISTOPHER FERGUSON	31 OCTOBER 2019
SIGNATURE OF DIRECTOR AVIATION SAFETY OR HIS/HER DESIGNATE		NAME IN BLOCK LETTERS	DATE 


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PART L	SATELLITE FACILITIES & LINE STATION RATINGS				
PHYSICALLOCATION (Address)	CLASS	MANUFACTURER	MAKEMODEL	LIMITATIONS	EXPIRYDATE
N/A	N/A	N/A	N/A	N/A	N/A

I hereby accept the conditions and limitations set forth in this approval as stated and contained in this paragraph.

	NIEL WARREN	8/11/19
SIGNATURE OF AMO REPRESENTATIVE	NAME IN BLOCK LETTERS	DATE

JOB TITLE Accountable Manager

I hereby approve the Operations Specifications contained in this paragraph.

Date approval is effective:	2	0	1	9	1	0	3	1	Revision Number:	Original
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	CHRISTOPHER FERGUSON	31 OCTOBER 2019
SIGNATURE OF DIRECTOR AVIATION SAFETY OR HIS/HER DESIGNATE	NAME IN BLOCK LETTERS	DATE

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CAAB