



OPERATIONS SPECIFICATIONS

(subject to the approved conditions in the operations manual)

HELLENIC CIVIL AVIATION AUTHORITY

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AOC: GR-016

Operator Name: AIR INTERSALONIKA H.A.T.C.S.A

Date: 24/01/2020

Dbas: AIR INTERSALONIKA



G. Sourvanos

Acting Director of Flight Standards

Operations Specifications#: GR-016 /OS-06

Aircraft Model & Registration Marks:

AS-355N : SX-HNM

A-109K2 : SX-HMY

C-90A : SX-BKY

B-200 : SX-INT

Types of Operations: Commercial operations

Passengers Cargo Others

Area of operation: N67.00.00 – W030.00.00, N72.00.00 – W010.00.00, N72.00.00 – E045.00.00, N40.00.00 – E045.00.00, N35.00.00 – E037.00.00, N30.00.00 – E037.00.00, N30.00.00 – W006.00.00, N27.00.00 – W008.00.00, N27.00.00 – W030.00.00.

Special Limitations: : 1. SX-HNM, SX-HMY : V.F.R. Flights / DAY ONLY

Specific Approvals:	Yes	No	Specification	Remarks
Dangerous Goods	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
Low Visibility Operations Take-off Approach and Landing	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
RVSM <input type="checkbox"/> N/A	<input checked="" type="checkbox"/>	<input type="checkbox"/>		BEECHCRAFT B-200
ETOPS <input type="checkbox"/> N/A	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
Complex Navigation specifications for PBN Operations	<input type="checkbox"/>	<input checked="" type="checkbox"/>		

Minimum navigation performance specification	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Operations of single-engined turbine aeroplane at night or in IMC (SET-IMC)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
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"/>	
Helicopter offshore 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"/>	
Use of type B EFB applications	<input type="checkbox"/>	<input type="checkbox"/>	
Continuing airworthiness	<input checked="" type="checkbox"/>	<input type="checkbox"/>	EL.MG.0018
Others	<input type="checkbox"/>	<input checked="" type="checkbox"/>	

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