

AIR OPERATOR CERTIFICATE

(Approval Schedule for air transport operators)

Type of operation : Commercial air transport (CAT)

☒ Passengers ☒ Cargo ☒ Other: Emergency Medical Services



GRAND DUCHÉ DE LUXEMBOURG

DIRECTION DE L'AVIATION CIVILE



LE GOUVERNEMENT
DU GRAND-DUCHÉ DE LUXEMBOURG
Ministère du Développement durable
et des Infrastructures
Direction de l'aviation civile

AOC L - 07

Luxembourg Air Ambulance S.A.

**Operational
points of contacts**

Approval Reference :

DAC/OPS 2016-57683

DBA trading name: None

Contact details are listed in:

Valid until suspended or
revoked

Operator address : Aéroport de Luxembourg
L-1110 Findel
Luxembourg

OM A Section 1 and
Organisation Management
Manual Section 3.2

Telephone : +352 48 90 06

Fax : +352 40 25 63

E.mail : info@air-ambulance.lu

This certificate certifies that ***Luxembourg Air Ambulance*** 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 :

15/04/2016

Pierre LAGER

Directeur de l'Aviation Civile



The present AOC cancels and replaces the former AOC (ref. D.A.C/OPS. 2014 – 40685)

OPERATIONS SPECIFICATIONS

(subject to the approved conditions in the operations manual)

ISSUING AUTHORITY CONTACT DETAILS

Phone: +352 247 74900
Fax: +352 46 77 90

E-mail: civilair@av.etat.lu



DAC

Directorate of Civil Aviation
Grand Duchy of Luxembourg



AOC n° : L-07

Operator name : Luxembourg Air Ambulance

Date : 04/04/2017

Signature :

DbA trading name : None

Pierre JAEGER

Directeur de l'Aviation Civile

Operations Specification : L-07-001

Aircraft model (s) : Bombardier Learjet 45

Aircraft Registration Marks
(According to Type / MAPSC)

LJ45 / 8
LJ45 / 9

LX-EAA
LX-RSQ

LX-LAA

LX-ONE

Types of operation : Commercial air transport ☒ Passengers ☒ Cargo ☒ Other : Emergency Medical Services

Area of operation : Worldwide

Special limitations : None

SPECIFIC APPROVALS	YES	NO	SPECIFICATIONS	REMARKS
Dangerous goods	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
Low visibility operations				
Take-off	<input checked="" type="checkbox"/>	<input type="checkbox"/>	RVR: 150 m	
Approach and landing	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/> LTS CAT I RVR: ____ m DH: ____ ft <input type="checkbox"/> CAT II RVR: ____ m DH: ____ ft <input type="checkbox"/> OTS CAT II RVR: ____ m DH: ____ ft <input type="checkbox"/> CAT IIIA RVR: ____ m DH: ____ ft <input type="checkbox"/> CAT IIIB RVR: ____ m DH: ____ ft	
RVSM <input type="checkbox"/> N/A	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
ETOPS <input type="checkbox"/> N/A	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Maximum diversion time: ____ minutes	
Complex navigation specifications for PBN operations	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
Minimum Navigation Performance Specification	<input checked="" type="checkbox"/>	<input type="checkbox"/>	NAT HLA	
Operations of single-engined turbine aeroplane at night or in IMC (SET-IMC)	<input type="checkbox"/>	<input checked="" type="checkbox"/>		Not applicable
Helicopter Operations with the aid of Night Vision Imaging System	<input type="checkbox"/>	<input checked="" type="checkbox"/>		Not applicable
Helicopter Hoist Operations	<input type="checkbox"/>	<input checked="" type="checkbox"/>		Not applicable
Helicopter Emergency Medical Service Operations	<input type="checkbox"/>	<input checked="" type="checkbox"/>		Not applicable
Helicopter Offshore Operations	<input type="checkbox"/>	<input checked="" type="checkbox"/>		Not applicable
Cabin Crew Training	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
Issue of CC attestations	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
Continuing airworthiness	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Continued Airworthiness Management Organisation Approval Approval Certificate number : LU.MG.07	
Other	<input type="checkbox"/>	<input checked="" type="checkbox"/>		

OPERATIONS SPECIFICATIONS

(subject to the approved conditions in the operations manual)

ISSUING AUTHORITY CONTACT DETAILS

Phone: +352 247 74900

E-mail: civilair@av.etat.lu

Fax: +352 46 77 90



DAC

Directorate of Civil Aviation
Grand Duchy of Luxembourg

AOC n° : L-07

Operator name : *Luxembourg Air Ambulance*

Date : 04/04/2017

Signature :

DbA trading name : *None*

Operations Specification : L-07-003

Pierrot EGPR
Directeur de l'Aviation Civile



Aircraft model (s) : McDonnell Douglas MD-902 Explorer

Aircraft Registration Marks
(According to Type / MAPSC)

EXPL / 6

LX-HMD

LX-HPG

LX-HMS

LX-HRC

LX-HAR

Types of operation : Commercial air transport ☒ Passengers ☒ Cargo ☒ Other : Emergency Medical Services

Area of operation : Europe

Special limitations: VFR day and night only
Not to be operated at pressure altitudes above 10.000 ft.

SPECIFIC APPROVALS	YES	NO	SPECIFICATIONS	REMARKS
Dangerous goods	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
Low visibility operations				
Take-off	<input type="checkbox"/>	<input checked="" type="checkbox"/>	RVR: ___ m	
Approach and landing	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/> LTS CAT I RVR: ___ m DH: ___ ft <input type="checkbox"/> CAT II RVR: ___ m DH: ___ ft <input type="checkbox"/> OTS CAT II RVR: ___ m DH: ___ ft <input type="checkbox"/> CAT IIIA RVR: ___ m DH: ___ ft <input type="checkbox"/> CAT IIIB RVR: ___ m DH: ___ ft	
RVSM <input checked="" type="checkbox"/> N/A	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
ETOPS <input checked="" type="checkbox"/> N/A	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Maximum diversion time: ___ minutes	
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"/>		Not applicable
Helicopter Operations with the aid of Night Vision Imaging System	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
Helicopter Hoist Operations	<input checked="" type="checkbox"/>	<input type="checkbox"/>		LX-HMD only
Helicopter Emergency Medical Service Operations	<input checked="" type="checkbox"/>	<input 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 attestations	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
Continuing airworthiness	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Continued Airworthiness Management Organisation Approval Approval Certificate number : LU.MG.07	
Other	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Public Interest Site: Limited to Germany according the LBA approval B228/30301/500/PIS dated 19-Dec-2014	