|  |
| --- |
| **PBN UPITNIK**  **PBN Questionnaire** |

|  |
| --- |
| Vaše područje djelatnosti (npr. komercijalno zrakoplovstvo, generalna avijacija, vojska):  Your area of activity (e.g. commercial aviation, general aviation, military): |
| Naziv tvrtke/organizacije/aerokluba (nije obvezno):  Name of the company/organization/aeroclub (not obligatory): |
| Država: State: |

|  |  |  |  |
| --- | --- | --- | --- |
| Navesti na koje LD međunarodne zračne luke dolazite i tip zrakoplova.  Specify LD destination aerodrome and type of aircraft | | | |
| LD AERODROME | Potvrdi destinaciju  Confirm destination | Tip zrakoplova  Type of aircraft | Napomena  Note |
| LDOS |  |  |  |
| LDZA |  |  |  |
| LDRI |  |  |  |
| LDPL |  |  |  |
| LDLO |  |  |  |
| LDZD |  |  |  |
| LDSP |  |  |  |
| LDSB |  |  |  |
| LDDU |  |  |  |

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Navesti razinu RNAV i/ili RNP opremljenosti i sposobnosti zrakoplova za PBN navigaciju, sukladno podacima navedenim u FPL (ICAO obrazac plana leta : ITEM 10 i ITEM 18 ).  Specify RNAV and/or RNP aircraft equipment and capabilities for PBN navigation, according to the data inserted in to the Flight Plan (ICAO model flight plan form: ITEM 10 and ITEM 18). | | | | | | | | |
| Navigacijska specifikacija  Navigation Specification  (NAVSPEC) | | | Potvrdi NAVSPEC  Confirm NAVSPEC | Potvrdi SENZORE  Confirm SENSORS | | | | Napomena  Note |
| GNSS | DME/DME | DME/  DME/  IRU | VOR/DME |
| RNAV 5 | | |  |  |  |  |  |  |
| RNP 1 | | |  |  |  |  | - |  |
| RNAV 1 | | |  |  |  |  | - |  |
| P-RNAV | | |  |  |  |  | - |  |
| Advanced RNP | | |  |  |  |  | - |  |
| RNP AR APCH | | |  |  |  |  | - |  |
| RNP APCH | | |  |  |  |  | - |  |
| Navigacijska specifikacija  Navigation Specification  (NAVSPEC) | | | Potvrdi NAVSPEC  Confirm NAVSPEC | | | | | Napomena  Note |
| RNP APCH  (specify minima line in use) | LNAV | |  | | | | |  |
| LNAV/VNAV  (APV BaroVNAV) | |  | | | | |  |
| LP  (SBAS) | |  | | | | |  |
| LPV  (SBAS) | APV I |  | | | | |  |
| APV II |  | | | | |  |
| CAT I |  | | | | |  |
| Dodatne informacije vezane uz SID/STAR RNAV postupke  Supplementary information for SIDs/STARs RNAV | | |  | | | | | |
| Vaši komentari na objavljene PBN postupke, koje biste mijenjali, što i zašto.  Your comments on published PBN procedures, which you would change, what and why. | | |  | | | | | |
| Upišite koje radionavigacijske uređaje nećete trebati nakon 2030?  Enter which radionavigation aids you will not need after 2030. | | |  | | | | | |
| Upišite Vaše potrebe u budućnosti.  Enter your needs in the future. | | |  | | | | | |

Molimo Vas da popunjeni upitnik pošaljete na: [blazenka.preradovic@crocontrol.hr](mailto:blazenka.preradovic@crocontrol.hr)

Please send filled questionnaire to the following address: [blazenka.preradovic@crocontrol.hr](mailto:blazenka.preradovic@crocontrol.hr)

Hvala na sudjelovanju!

Thank you for participation!