|  |  |  |
| --- | --- | --- |
|  | **AIR TRAFFIC MANAGEMENT ASSURANCE REVIEW ITEM**  |  |
| 1. The Air Traffic Management – Assurance Review Item (ATM-ARI) process is a formal means of communicating an issue, chronologically recording Regulated Community (RC) and Military Aviation Authority (MAA) positions, until a mutually acceptable position is reached.
2. ATM-ARI sentencing can either be; accepted or rejected. If rejected, an Alternative Acceptable Means of Compliance (AAMC), Waiver or Exemption submission would be required in accordance with MAA 03: MAA Regulatory Processes.

 |
| SECTION 1 – Project Reference |
| 1. **UNIQUE MAA Register reference:**

*THIS BOX IS TO BE COMPLETED BY THE MAA* | 1. **unique project name:**

*TOPSKY / PAR ETC* |
| 1. **DEF STAN 00-972 ISSUE:**

*DEF STAN PART 4 ISSUE 5* | 1. **AFFECTED EQUIPMENT:**

*EQUIPMENT* |
| SECTION 2 – POINTS OF CONTACT |
| 1. **POINT OF CONTACT**
 |
| *Point of contact should be the person with overall responsibility for managing the issue.**Enter the name of the Delivery Team or MOD organization responsible.* *Telephone Number: 00000 000000**Email address:* *xxxxxx.xxxxx123@xxx.xxx.xx* |
| SECTION 3 – STATEMENT OF ISSUE |
| 1. **STATEMENT OF ISSUE**
 |
| *Identify the issue.* |
| 1. **AFFECTED REQUIREMENTS**
 |
| *Identify the list of affected requirements including primary paragraph, advisory material and any other relevant supporting material.* |
| SECTION 4 – DISCUSSION |
| 1. **RC POSITION**
 |
| *The position of the RC – eg proposed means of resolving issue.* |
| NAME: *Grade / Name* | ROLE: *Role* | DATE: *Date* |
| 1. **MAA POSITION**
 |
| *The position of the MAA – eg MAA viewpoint on RC’s proposed means of resolving the issue.* |
| NAME: *Grade / Name* | ROLE: *Role* | DATE: *Date* |
| 1. **RC POSITION**
 |
| *The position of the RC – eg proposed means of resolving issue in response to MAA feedback.* |
| NAME: *Grade / Name* | ROLE: *Role* | DATE: *Date* |
| 1. **MAA POSITION**
 |
| *The position of the MAA – eg MAA viewpoint on RC’s response to MAA feedback.* |
| NAME: *Grade / Name* | ROLE: *Role* | DATE: *Date* |
| 1. **RC POSITION**
 |
| *The position of the RC – eg proposed means of resolving issue in response to MAA feedback.* |
| NAME: *Grade / Name* | ROLE: *Role* | DATE: *Date* |
| SECTION 5 – CONCLUSION |
| 1. **MAA CONCLUSION**
 |
| *A clear and unambiguous record of the agreed resolution to the statement of issue.*  |
| 1. **SIGNATURES**
 |
| DESIGN TEAM Signature: | MAA Signature: |
|   |   |
| 1. **SUBMISSION INSTRUCTIONS**
 |
| 1. Please email this document to the MAA ATM Certification team (DSA-MAA-CertPTCGroup@mod.gov.uk)
 |

Appendices:

Any relevant supporting material that would ensure the ATM-ARI is self-contained and self-explanatory.