

Flight Procedures Cover Page	Task Action: FLIGHT CHECK	Task Type: IAP	Estimated Chart Date: 02/20/2025	APWS Task ID: A11FA3E129C1424E9F10EE2E2205101E	APWS Project ID: B262D166695C4335B64BC22B4319EBC4
Procedure: COPTER RNAV (GPS) M 125 ORIG		Enroute: NO	Specialist: Mccartney, Michael		Agreement Number:
Airport ID: ME42			Airport City: BRUNSWICK		State: ME
Facility ID:	Facility Type:	Flight Inspection Remark Type: New FC Slot			

Procedure Comments:  
SPECIAL PROCEDURE.  
ORIGINAL PROCEDURE.  
ACTIVE DATA UTILIZED.

BLANKET WAIVER ON FILE:  
AFS-400 MEMO DATED 01/12/24, SUBJECT: WAIVER TO SIGNATURES ON SPECIAL INSTRUMENT FLIGHT PROCEDURE FORMS.  
  
CONTACT: ERIC SUSKI, AJV-A431, MANAGER, 405-954-7331.



8260-2 FIXES PHIGG, SATLY, TOBKE:  
11/26/24: THIS IS A UPDATED COPY OF THE FORMS APPROVED ON 10/25/24  
1. CHANGED FIX USE CITY AT 61ME FROM BOOTHBAY TO BOOTHBAY HARBOR.



Digitally signed by  
**ERIC N SUSKI**  
Nov 26, 2024

FIPC BASIC FORM									
PROCEDURE: COPTER RNAV (GPS) M 125 ORIG				AIRPORT NAME: MID COAST HOSPITAL		AIRPORT ID: KME42		SPECIAL CONTROL NO: YG-10-036-24	
FAC ID: 32739			CITY: BRUNSWICK			ST: ME		ORIG CHART DATE: 02/20/2025	
DFL TYPE: PROC/H	THIRD PARTY: <input type="checkbox"/> YES	EST. TIME ON SITE: 0.5	REIMB. NUMBER:		PTS TASK ID: A11FA3E129C1424E9F10EE2E2205101E				
PREFLIGHT NOTES									
REVIEWER:						DATE:			
COMMENTS:						CHECK ONE: <input type="checkbox"/> FLT CK REQ <input type="checkbox"/> NFCR <input type="checkbox"/> REJECT			
								YES	NO
						CPV COMPLETE?		X	
PROCEDURE RESULTS									
INSPECTION DATE: 10/22/2024		CREW #: VN423	N #: HELO	INSTRUMENT PROCEDURE STATUS: <input checked="" type="checkbox"/> SAT <input type="checkbox"/> SAT W/CHANGES <input type="checkbox"/> UNSAT			ARINC CODING: <input type="checkbox"/> SAT <input type="checkbox"/> SAT/GOLD <input type="checkbox"/> UNSAT		
FLIGHT INSPECTOR SIGNATURE: terry hester @ 10/23/2024 09:31				PRINTED NAME: HESTER, TERRY LEE				NOTAM INITIATED? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
FLIGHT INSPECTOR REMARKS: Special Number YG-10-036-24: MID COAST HOSPITAL, BRUNSWICK, ME. COPTER RNAV (GPS) M 125 ORIG, SAT.									
IN-FLIGHT OBSTACLE REPORT									
OBSTRUCTION ID #:	COORDINATES OR LOCATION:		GNSS ALTITUDE (MSL):		BAROMETRIC ALTITUDE (MSL):		HEIGHT ABOVE GROUND LEVEL:		



## **Federal Aviation Administration**

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# **Memorandum**

Date: January 12, 2024

To: Instrument Flight Procedure Service Providers  
WADE EK  
TERRELL

From: Douglas F. Rodzon, Acting Manager, Flight Technologies and Procedures Division

Subject: Waiver to Signatures on Special Instrument Flight Procedure Forms

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Digitally signed by  
WADE EK TERRELL  
Date: 2024.01.12 09:55:54  
-06'00'

Flight Standards will no longer sign the “Approved By” or “Recommended By” line of FAA Forms for special instrument flight procedures (IFPs).

All service providers are authorized to sign the “Approved By” or “Recommended By” line of FAA Forms 8260-2, 8260-7A, 8260-15A, 8260-15B, 8260-16, and 8260-17.1. By signing, service providers certify that the IFP was developed in accordance with applicable policies, directives, standards, and criteria and is approved for further processing.

The following paragraphs are waived:

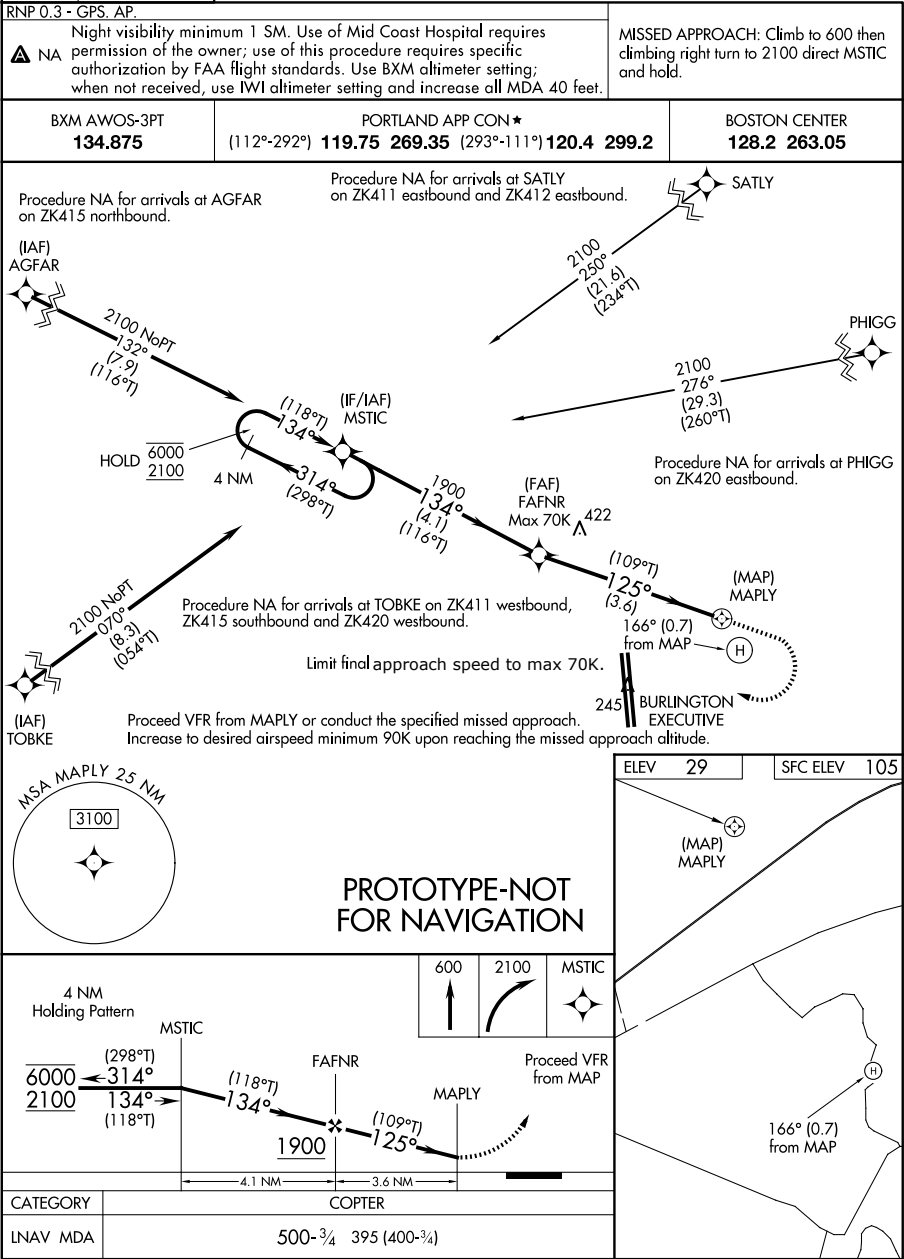
1. FAA Order 8260.19, Flight Procedures and Airspace, Paragraphs: 4-5-12m, 8-5-2s, 8-5-2t(2), 8-5-2u(3), 8-6-18, 8-6-19b(2).
2. FAA Order 8260.46, Departure Procedure (DP) Program, Paragraphs: Appendix D, Section 1, paragraph 2m; Appendix D, Section 2, paragraph 2t; Appendix E, Section 1, paragraph 2t.
3. FAA Order 8260.60 paragraph 2-1-3 c(1).

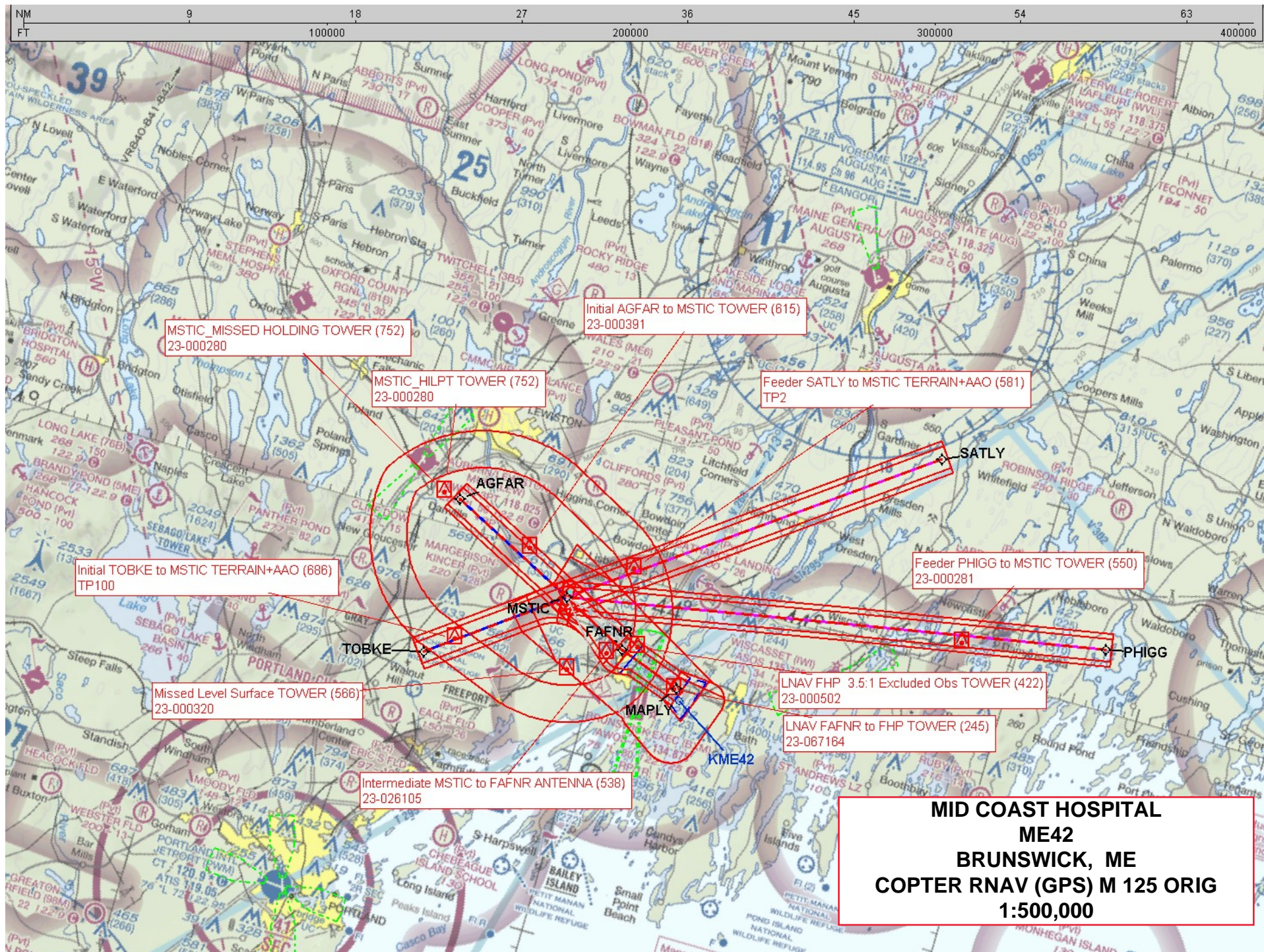
This memorandum remains in effect until rescinded. Please direct all inquiries to the Flight Procedures and Airspace Group, Standards Section at 405-954-1139 or 9-AWA-AVS-AFS420@faa.gov.

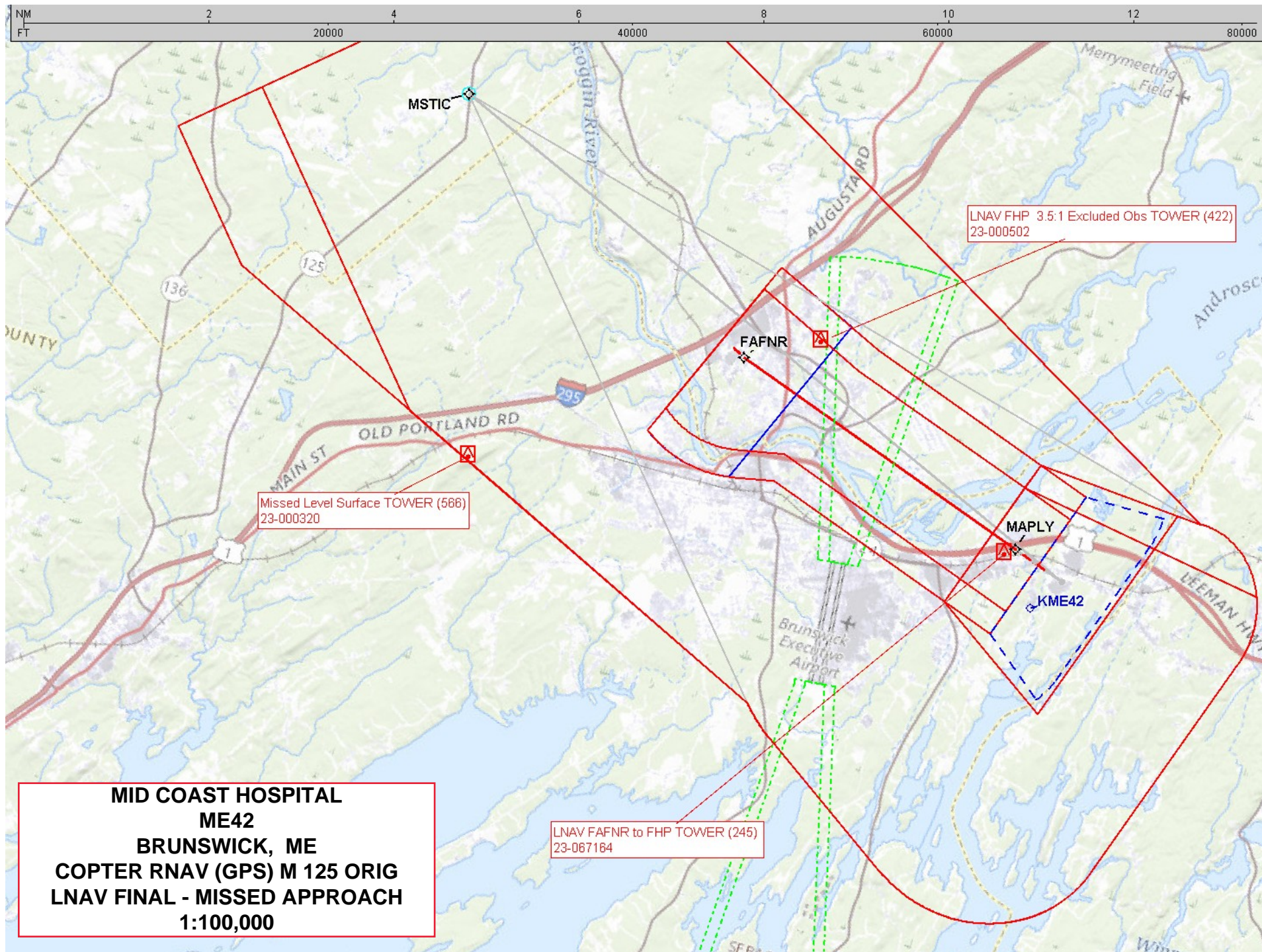
APP CRS <b>125°</b>	Rwy Idg Surf Elev Apt Elev	N/A <b>105</b> <b>29</b>
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COPTER RNAV (GPS) M 125°

MID COAST HOSPITAL (ME42)







**MID COAST HOSPITAL  
ME42  
BRUNSWICK, ME  
COPTER RNAV (GPS) M 125 ORIG  
LNAV FINAL - MISSED APPROACH  
1:100,000**