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| --- | --- | --- | --- | --- | --- |
| **Operator:** |  | **Area of Inspection:** |  | **CAA Ref No:** |  |
| **Name of Post Holder** |  | **Inspection Date:** |  | **Location/****Sector:** |  |
| **Email:** |  | **Flight No.** |  | **Aircraft Type: Registration:** |  |
| **Date:**  |  | **Name(s) of the Auditee/****Commander:** |  | **Issue date:** |  |
| **Name of CAA Inspector/s:**  |  |  |  |  |  |
| **Email:**  |  |  |  |  |  |

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| **PART 1 - List of Deficiencies** |
| **S/N** | **Deficiencies Description** | **Level/****Category** | **Target Date****(Days)** | **Reference CAR/ Standard Para/Chapter** |
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| **The operator is required to take corrective action and determine the root cause, within the target date** |
| **PART 2: Operator’s Response (Operator Use)****Root Cause / Corrective / Preventive Actions** |
| **S/N** | **Root Cause/s** | **Corrective Action/s** | **Evidences****(Attachments)** | **CAA FOI Remarks** |
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| **Note:** * **Corrective actions taken for each deficiency.**
* **Attach supporting documents.**

**A commitment does not qualify as a corrective action** |

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| **PART 3 (CAA USE ONLY)****Closure Actions** |

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| **S/N** | **Corrective Action (Please Tick**$ √ $**)** | **Remarks (in case corrective action is not satisfactory)** |
|  | Accepted |  | Not accepted |  |  |
|  | Accepted |  | Not accepted |  |  |
|  | Accepted |  | Not accepted |  |  |
|  | Accepted |  | Not accepted |  |  |
|  | Accepted |  | Not accepted |  |  |
|  | Accepted |  | Not accepted |  |  |

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| **Remarks:**Corrective actions un-satisfactory. Return to operator for further action.Corrective actions satisfactory may be closed. |

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| **Name of Inspector** | **Signature** | **Date** |
|  |  |  |

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| **Chief Operations Section (COS)Final Remarks**  |
| **Action: Closed** |  | **Further Action Required** |  | **Remarks** |

|  |  |
| --- | --- |
| **Name of COS:** |  |
| **Signature:** |  |
| **Date:** |  |