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| --- | --- | --- | --- |
| Organization:  |  | AOC No.:  |  |
| Date:  |  | Location:  |  |
| Post Holder Operations: |  | Telephone No: |  |
| Email: |  |  |  |

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| ***Instructions*** 1. Check ***(S) (****Satisfactory)*column if you determine the document or individual item conforms to requirements.
2. Check ***U/S*** *(Unsatisfactory)* column if you determine that the document or individual line item does not comply (put a marker tab in the manual with a short note opposite the non- conforming item).
3. Insert ***N/C*** *(Not Checked)*if the item was not checked. Reasons should be given in the ***Remarks*** column.
4. Check ***N/A*** *(Not Applicable)**in the* ***Remarks*** column if it is not applicable or you do not have adequate information to make a valid comment.
5. Coordination is required between FOPS and PEL as necessary. The respective inspector shall sign on the last column after reviewing the item.
6. Use the remarks column at the end for overall remarks or observations. For detailed findings inspectors should also use the Audit Inspection Report Form Base-Insp-004. Attach to this checklist.
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| **S/N** | **Pre-Audit** | **S** | **U/S** | **Remarks** |
|  | Current copy of the Flight Operations Manual available? |  |  |  |
|  | Current copy of the Aircraft-Specific Operations Manual available? |  |  |  |
|  | Current copy of Aircraft-Specific Checklists available? |  |  |  |
|  | Current copy of the Flight Dispatch Manual available? |  |  |  |
|  | Current copy of Aircraft Performance available? |  |  |  |
|  | Current copy of Emergency Response Manual available? |  |  |  |
| **S/N** | **Operational Flight Plan – Nav Log** | **S** | **U/S** | **Remarks** |
|  | “Manual” nav – log plan used appropriate for this flight operation? |  |  |  |
|  | Assigned person accurately computed the manual plan? |  |  |  |
|  | Computer plan/nav log obtained from an approved source? |  |  |  |
|  | Computer plan/nav log calculated accurately? |  |  |  |
|  | “Manual” nav – log plan used appropriate for this flight operation? |  |  |  |
|  | Assigned person accurately computed the manual plan? |  |  |  |
|  | Operational flight plan/nav log formats, examples and completion procedures accurately described in the Operations Manual? |  |  |  |

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| **S/No.** | **Weather** | **S** | **U/S** | **Remarks** |
|  | Dispatch weather procedures practiced as detailed in the approved operations manual |  |  |  |
|  | Complete weather briefing received by the flight crew? |  |  |  |
|  | Weather data obtained from approved source? |  |  |  |
|  | Terminal weather METAR and TAFs (forecasts) appropriate for the flight? |  |  |  |
|  | En-route weather and winds appropriate for the flight? |  |  |  |
|  | “Real-time” weather displays or charts available for consultation? |  |  |  |
|  | Weather data consistent with that used for ops plan/nav log? |  |  |  |
|  | Flight plan routing the best for the forecast weather? |  |  |  |
|  | Weather data appropriate to the flight(s) retained in appropriate method and period as required |  |  |  |
| **S/N** | **Selection of Alternates** | **S** | **U/S** | **Remarks** |
|  | Appropriate takeoff alternate selected? |  |  |  |
|  | Appropriate en-route alternates selected? |  |  |  |
|  | Appropriate destination alternates selected? |  |  |  |
|  | Alternates included in ops plan – nav log |  |  |  |
| **S/N** | **NOTAM and Aircraft Data** | **S** | **U/S** | **Remarks** |
|  | Appropriate NOTAM data provided to the flight crew? |  |  |  |
|  | NOTAM data obtained from an approved source? |  |  |  |
|  | Route guide and nav charts available to operational control? |  |  |  |
|  | Manual Nav log coordinates compared to the nav charts coordinates |  |  |  |
|  | Aircraft specific takeoff and landing performance available? |  |  |  |
|  | Takeoff performance manually calculated? |  |  |  |
|  | Appropriate obstacle data use in the takeoff calculation? |  |  |  |
|  | Aircraft performance data from an approved source and current? |  |  |  |
| **S/N** | **Fuel Requirements and Load Management** | **S** | **U/S** | **Remarks** |
|  | Flight planning minimum fuel calculations based on weights approximated from a valid source? |  |  |  |
|  | Minimum fuel contingencies considered? |  |  |  |
|  | Fuel/oil uplift information available? |  |  |  |
| **S/N** | **(Contd.) Fuel Requirements and Load Management** | **S** | **U/S** | **Remarks** |
|  | Completed load manifest for the flight(s) available? |  |  |  |
|  | Source record for aircraft empty and basic operating weights available? |  |  |  |
|  | Load manifest contain the required takeoff weight limitation comparisons? |  |  |  |
|  | Takeoff and landing weights accurately calculated? |  |  |  |
|  | Standard passenger and baggage weights authorized and used properly? |  |  |  |
|  | Actual weights required and used properly? |  |  |  |
|  | Approved method of computer load manifest calculation used? |  |  |  |
|  | Manual calculations yield the same results as the computer? |  |  |  |
|  | Presence of dangerous goods properly manifested? |  |  |  |
|  | Load manifest updated for the last minute changes? |  |  |  |
|  | Update posted in the flight preparation records before takeoff and communicated to flight crew? |  |  |  |
|  | Copy of the signed load manifests retained? |  |  |  |
|  | Retention method and time period acceptable? |  |  |  |
|  | Applicable Operations Manual flight dispatch policies and procedures applied as written? |  |  |  |
|  | Mass and balance flight calculations prepared by a competent and qualified person for the specific aircraft type? |  |  |  |
| **S/No.** | **Flight Crew Scheduling Considerations** | **S** | **U/S** | **Remarks** |
|  | Flight crew current and qualified for the flight operation? |  |  |  |
|  | Cabin crew current and qualified for the flight operation? |  |  |  |
|  | At least one of the flight crew have 100+ hours in type? |  |  |  |
|  | Pilots properly qualified for all weather operations minima as applicable? |  |  |  |
|  | Proper crew flight and rest time requirements applied? |  |  |  |
|  | Personnel records of the crew scheduling employees show training completion on the subjects relating to their job tasks? |  |  |  |
| **S/N** | **Aircraft Considerations** | **S** | **U/S** | **Remarks** |
|  | On-going MEL –deferred items of the aircraft available? |  |  |  |
|  | On-going maintenance status of the aircraft available? |  |  |  |
| **S/No.** | **(Contd.) Aircraft Considerations** | **S** | **U/S** | **Remarks** |
|  | Copy of the tech log with maintenance release available? |  |  |  |
|  | Aircraft CAT II/III ready? |  |  |  |
|  | Aircraft EDTO ready? |  |  |  |
|  | Aircraft Navigation equipment status appropriate for flight |  |  |  |
| **CAR OPS-1.160 CAR OPS-1.160 Preservation, production and use of flight recorder recordings** |
| **(AC OPS-1.160(a)(1) & (2) Preservation of Recordings)** |
|  | CAR OPS-1.700 Cockpit voice recorders (CVR) – 1(See AC OPS-1.700)  |  |  |  |
|  | CAR OPS-1.705 Cockpit voice recorders (CVR) – 2 |  |  |  |
|  | CAR OPS-1.705 Cockpit voice recorders (CVR) – 2(See AC OPS-1.705) |  |  |  |
|  | CAR OPS-1.710 Cockpit voice recorders (CVR) – 3 |  |  |  |
|  | **(b)** CVR recording parameters: |  |  |  |
|  | **(c)** Retention of FDR and CVR |  |  |  |
|  | **CAR OPS-1.712 Flight Recorder Composition** | **S** | **U/S** | **Remarks** |
|  | **(d)** de-identified; or. |  |  |  |
|  | **(e)** disclosed under secure procedures. |  |  |  |
| **Note 7:** Provisions on the protection of safety data, safety information and related sources are contained in CAR 100 |
| **(7)** As of 7 November 2019, the Omani operator shall establish a flight safety documents system, for the use and guidance of operational personnel, as part of its safety management system.  |
| **Note**: Guidance on the development and organization of a flight safety documents system is provided in ICAO Annex 6 Volume 1 Attachment F. |
|  | **CAR OPS-1.713 FDR/CVR Continued Serviceability** |  |  |  |
|  | **CAR OPS-1.715 Flight data recorders (FDR) – Commercial Air Transport**(See Appendix 1 to CAR OPS-1.715 & AC OPS-1.715) |  |  |  |
|  | **CAR OPS-1.715 Flight data recorders (FDR) – Commercial Air Transport** |  |  |  |
|  | **CAR OPS-1.720 Flight data recorders (FDR) – General Aviation** |  |  |  |
|  | **CAR OPS-1.721 Flight Recorders General Requirements** |  |  |  |
| **S/No.** | **ATC Flight Plan Status and Flight Monitoring** | **S** | **U/S** | **Remarks** |
|  | ATS flight planned filed? |  |  |  |
|  | ATS Flight plan routing and equipment entries appropriate and accurate? |  |  |  |
| **S/No.** | **(Contd.) ATC Flight Plan Status and Flight Monitoring** | **S** | **U/S** | **Remarks** |
|  | Takeoff and landing times for current flights available? |  |  |  |
|  | Assigned duty person could provide an approximate position of the flight(s) at a selected time? |  |  |  |
|  | Operational control person has immediate access to telephone lines dedicated to flight operations issues? |  |  |  |
|  | Could operational control personnel contact the flight en-route? |  |  |  |
|  | Could each station be contacted during the period prior to flight arrival and immediately prior to flight arrival? |  |  |  |
|  | Flight locating information available including flight crew ability to communicate with operations control as required by regulation? |  |  |  |
|  | Operational control persons maintain a continuous log? |  |  |  |
|  | A record of all radio communications is maintained by log or tape? |  |  |  |
|  | Communication records are available for previous flights (ACARS, radio, etc.)? |  |  |  |
| **S/No.** | **Operational Control Qualifications** | **S** | **U/S** | **Remarks** |
|  | Operational control persons properly trained? |  |  |  |
|  | Operational control persons properly qualified? |  |  |  |
| **S/No**. | **Overall Assessment** | **S** | **U/S** | **Remarks** |
|  | Personnel were qualified and competent |  |  |  |
|  | Operational Control compliance with CARS and Operations Manual, except where noticed. |  |  |  |
|  | Adequate facilities and equipment available for required tasks |  |  |  |

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| **Findings & Observations:** |
| **Inspector Name:** |  |
| **Signature:** |  |
| **Date:** |  |