

To : GAM CAMO Personnel and Contracted AMO Personnel
CC : GAM Accountable Manager, GAM Quality Assurance Manager, GAM Engineering Manager
From : Continuing Airworthiness Management (CAM) Manager
Subject : Additional Instruction for Completing Worksheet

1. REFERENCE

- a. GAM/CAAM/CAME Issue 3 Revision 2 or later approved revision.
- b. GAM/CAMO/CAMP Issue 2 Revision 2 or later approved revision.

2. APPLICABILITY

- a. All aircraft managed by GAM CAMO

3. INTRODUCTION

- a. During Product Audit, QA department has raised an observation finding that the instruction to fill up the independent inspection column is incomplete and require further clarification.
- b. This notice is raised to introduce the upcoming additional instruction and clarification required to ensure compliance with the above instruction.
- c. The compliance to these instructions shall be effective for worksheet issued after 31 October 2023 and shall be integrated into the upcoming revision of the Worksheet and instruction for completing form.

4. REQUIREMENT

¹ Item	² Description	³ Technician	^{4*} Eng. CRS	⁵ Date
	THE INDEPENDENT INSPECTION FOR TASK _____ ⁶ CARRIED OUT IN ACCORDANCE WITH THE CAGM 8601 PARA 9.4. 1st Inspector Sign: _____ ⁷ Approval/Stamp: _____ ⁸ DATE: _____ ⁹ 2nd Inspector Sign: _____ ¹⁰ Approval/Stamp: _____ ¹¹ DATE: _____ ¹²	/		

Figure 1 Worksheet (Independent Inspection Column)

NO	ITEM	INSTRUCTIONS
1.	ITEM	Enter the sequence number of the inspection/task. For independent inspection enter the numbering X.1 where: X = same sequence number as the related inspection/task requiring independent inspection.
2.	DESCRIPTION	For independent inspection, refer to item 6 to 12.

NO	ITEM	INSTRUCTIONS
3.	TECHNICIAN	Technician performing the task to sign the column upon inspection completion. LAE to sign the column if task was performed by him/herself. For independent inspection, CAMO Planner to cross off the column as shown in Figure 1.
4.	ENG. CRS	Respective LAE to sign and stamp upon satisfactory completion of the inspection/task. For independent inspection, CAMO Planner to cross off the column as shown in Figure 1.
5.	DATE	Enter the date of inspection/task completed. For independent inspection, CAMO Planner to cross off the column as shown in Figure 1.
6.	TASK	Enter the related inspection/task requiring independent inspection
7.	1 ST INSPECTOR SIGN	To be signed by the respective LAE who performs the task or supervise the task and they assume the full responsibility for the completion of the task in accordance with the applicable maintenance data.
8.	APPROVAL/STAMP	Respective LAE who performs the task or supervise the task to stamp their approval number.
9.	DATE	Enter the date the task was performed.
10.	2 ND INSPECTOR SIGN	To be signed by the respective LAE who performs the independent inspection and attests the satisfactory completion of the task and that no deficiencies have been found.
11.	APPROVAL/STAMP	respective LAE who performs the independent inspection to stamp their approval number.
12.	DATE	Enter the date the independent inspection was performed.

Kindly be informed and adhere to the requirement.



Zaty Nadhira binti Mohamed Zuhari
Continuing Airworthiness Management Manager