

| MOC CHECKLIST | | |
|---------------|------------|--|
| Form no. | GAM/Q-011A | |
| Revision | 2 (03/24) | |
| Reference no. | | |

| Α | MOC Details | | | | |
|-----|--|-----|---|---|---------|
| 1. | MOC reference no. | | | | |
| 2. | Date raised | | | | |
| 3. | Auditor | | | | |
| 4. | Date | | | | |
| 5. | Audit report no. | | | | |
| В | Checklist Details | | | | |
| No. | Check items | | Υ | N | Remarks |
| 1. | MOC form | | | | |
| | Current form | | | | |
| | Requestor signed | | | | |
| | ■ HOD signed | | | | |
| | Safety Manager signed | | | | |
| | Accountable Manager sign | ed | | | |
| | Application letter | | | | |
| 2. | DCA forms | | | | |
| | ■ JPA-AP7(A) | | | | |
| | Application forms | | | | |
| | AN compliance | | | | |
| | ■ Fees and charges | | | | |
| 3. | GAM 1 st level document | | | | |
| | ■ MOE amended | | | | |
| | SMS Manual amended | | | | |
| | ■ CAME amended | | | | |
| | ■ DOM amended | | | | |
| | ■ MMP amended | | | | |
| | 2nd level amended | | | | |
| | ■ Contract agreement availa | ble | | | |
| | ■ HIRARC | | | | |



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| | ■ Others | | | |
|----|---------------------------------------|--|--|--|
| 4. | Maintenance Data | | | |
| | ■ GAM have access? | | | |
| | Current and up to date? | | | |
| | ■ Readily available? | | | |
| | Master list available & update? | | | |
| | ■ Others | | | |
| 5. | Tools & equipment | | | |
| | ■ General tools available? | | | |
| | Special tools available? | | | |
| | Calibrated tools available? | | | |
| | ■ Test equipment available? | | | |
| | Dockings & platforms | | | |
| | Safety equipment | | | |
| | ■ Inventory, up to date & controlled? | | | |
| 6. | Facilities | | | |
| | ■ Where | | | |
| | ■ Hangar | | | |
| | ■ Store | | | |
| | ■ Tool crib | | | |
| | ■ Office | | | |
| 7. | Personnel | | | |
| | ■ Man-hour plan | | | |
| | ■ LAE (B1.3) - name | | | |
| | ■ LAE (B2) - name | | | |
| | ■ LAE (C) - name | | | |
| | ■ Technician - name | | | |
| | Competency assessment | | | |
| | ■ LOAH – updated? | | | |
| | Support staff | | | |



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| | ■ Others | |
|----|---------------------------------|---------|
| 8. | Training | |
| | Appropriate training conducted? | |
| | ■ Formal training conducted | |
| | Continuation training | |
| | ■ Training records up to date? | |
| | ■ Others | |
| С | Findings | |
| 1. | | |
| 2. | | |
| 3. | | |
| 4. | | |
| 5. | | |
| 6. | | |
| 7. | | |
| 8. | | |
| 9. | | |
| D | Approval | |
| 1. | Performed by: | Date: |
| | *Name & Signature | |
| | | |
| 2. | MOC checklist | Date: |
| | • | |
| | • | |
| 3. | Status | Remarks |
| | ■ Open | |
| | ■ Closed | |
| | ■ Cancelled | |