

GSE INSPECTION SHEET

GROUND SUPPORT EQUIPMENT DETAILS			
PART NUMBER	DESCRIPTION	LOCATION	INSPECTION INTERVAL (D-DAY , M-MONTH , Y-YEAR)
SERIAL NUMBER	INSPECTION TYPE (PLEASE "X" WHERE APPLICABLE)	GSE NUMBER	
	<input type="checkbox"/> VISUAL INSPECTION <input type="checkbox"/> SERVICING <input type="checkbox"/> FUNCTIONAL <input type="checkbox"/> REPAIR		
INSPECTION DETAILS			
REMARKS :			
PERFORMED BY : (NAME)		SIGNATURE :	
INSPECTION DATE :		NEXT DUE :	

INSTRUCTIONS FOR FILLING OUT THE GAM/E-034 GSE INSPECTION SHEET.

GROUND SUPPORT EQUIPMENT DETAILS	
PART NUMBER	Insert the part number of the equipment.
DESCRIPTION	Insert the name or description of the equipment.
LOCATION	Insert the location of the equipment is allocated. E.g : PGU AW139 SUBANG.
INSPECTION INTERVAL	Insert the interval inspection such as D – Day , M – Month , Y – Year.
SERIAL NUMBER	Insert the serial number of the equipment.
INSPECTION TYPE	Marked “ X ” to choose type of inspection carried out.
GSE NUMBER	Insert the GSE register or control Number.
INSPECTION DETAILS	
REMARK	Insert a note if any findings are discovered during the inspection.
PERFORMED BY	Insert the name of person carried out the inspection.
SIGNATURE	Insert the signature of the person who performed the inspection.
REMARKS	Insert any additional notes or findings discovered during the inspection.
NEXT DUE (DATE)	Insert the next due date for the equipment's inspection.