

Management of Change			
MOC ref. no.:	GAM/MOC/24/0014		
Date Raised:	20 Feb 2024		

Α	MOC DETAILS (to be completed by requestor)						
1.	MOC title	Replacement HOM-AMO Maintenance Manager					
2.	Type of MOC	New N	1OC				
3.	Category	Perma	nent				
4.	Priority	L1-Urgent					
5.	Doc. affected		МОЕ		SMSM	CAME	
5.			DOM		2nd level manual	Others	
6.	Doc. reference	ном-	ММР				
		i. Name Azillah Bin Matap					
7.	Requestor	ii. Department Engineering					
		iii. Sta	iii. Staff no. 8054				
В	DESCRIPTION AND SCOPE O	OF CH	ANGES				
1.	Description :						
	Replacement of Maintenance Mana	ager (A	vionic) HOM				
2.	Justification for changes :						
	Mohd Jamil Bin Samsudin as Maintenance Manager (Avionic) resign from Galaxyaerospace						

3.	Maintenance Data / Publications / Manual :				
	HOM-MMP				
4.	Test equipment and tooling requirement :				
	Nil				
5.	Hangar / Workshop accommodation / facilities :				
	Nil				
6.	Qualified / authorized personnel for task : Muhammad Muzzafar Bin Abdul Mutalib				
	Muhammau Muzzarar Biri Abdur Mutarib				
7.	Training:				
	Nil				

8.	Name		Signature	Date			
	Requestor: Azillah Bin Matap			20 Feb 2024			
	Head of Department: Syafrul Yamani S	afruddin	My	20 Feb 2024			
9.	Comments by requestor Head of D	Pepartment :	,				
10.	Note: Complete section A & B and Department	then emaill it along with s	supporting document to Quality Ass	urance Department and Safety			
С	SAFETY MANAGEMENT SYS	TEM SECTION					
1.	HIRARC						
		Reference No.:					
2.	Comments						
3.	Name		Signature	Date			
D	ACCOUNTABLE MANAGER APPROVAL (to be completed by Accountable Manager)						
1.	Approval						
2.	Comments						
3.	Name		Signature	Date			
4.	Note: If approved, section E to be	completed					

E	QUALITY ASSURANCE DEPARTMENT SECTION					
1.	Date Received					
2.	Classification					
3.	Audit Needed					
4.	Audit performed by					
5.	Audit reference no.					
6.	Justification for classification					
7.	Comments / Remarks					
8.	DCAM / CAAM Approval Section					
	Date Submission	Not Applicable due to N	Not Applicable due to NOT significant			
	Approval ref. no.					
9.	Approval from Quality Assurance N	Manager				
	Name		Signature	Date		
	-					
F	IMPLEMENTATION REVIEW					
1.	Status					
2.	Comments / Remarks					
3.	Date closed					
4.	Closed by					
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