

OPS-CHK-024

Organisation and infrastructure

Check as appropriate

Initial evaluation/certification

Continued safety oversight (shaded items)

Inspectors name:

Operator:

Operator's representative:

Place of Inspection:

Date of Inspection:

Filling instructions

Item checked and satisfactory – check S box

Item checked and unsatisfactory – check U box

Item applicable but not checked – check D box and explain the reason in the item's Remarks field (e.g. "responsible person not present, etc.). If the space in the item's Remarks field is insufficient to enter the remark, input reference (Rem 1, Rem 2, Rem 3 etc.) and indicate Rem 1, Rem 2, Rem 3 etc. with the complete remark text in the Remarks field at the end of the checklist.

Item not applicable – check N/A box and explain the reason of non-applicability in the item's Remarks field (e.g. "item not applicable as the operator does not employ flight dispatchers", "item not applicable as the operator does not employ cabin crew", "item not applicable as the operator is not obliged to carry out Flight Data Monitoring Program" etc.). If the space in the item's Remarks field is insufficient to enter the remark, input reference (Rem 1, Rem 2 Rem 3 etc.) and indicate Rem 1, Rem 2, Rem 3 etc. with the complete remark text in the Remarks field at the end of the checklist.

All items are to be carried out on the occasion of the first evaluation/certification.

Shaded items are to be carried out on the occasion of the continued safety oversight. This does not infer that non shaded items shall not be carried out during continued safety oversight.

Result:		S – Satisfactory	U – Unsatisfactory	D – Deferred			N/A – Not applicable		
	Reference	Checked Item			S	U	D	N/A	Remarks
1. Organisation and infrastructure									
1.1	ORO.GEN.305(b)	Convene meeting with the accountable manager to ensure both MKD CAA and he/she remain informed of significant issues			☐	☐	☐	☐	
1.2	ORO.GEN.210(a)	Has organization appointed accountable manager who has the authority for ensuring that all activities can be financed and carried out in accordance with the applicable requirements? Verify appointment letter, work contract or equivalent and unlimited access to financial resources of the operator			☐	☐	☐	☐	
1.3	ORO.GEN.210(b) ORO.AOC.135(a)	Is a person or a group of persons nominated by the operator, with the responsibility of ensuring that the operator remains in compliance with the applicable requirements? Flight Operations, Ground Operations, Crew Training, Maintenance? Verify appointment letter, work contract or equivalent			☐	☐	☐	☐	
1.4	ORO.GEN.210(c) ORO.AOC.135(b)	Does the operator have sufficient qualified personnel for the planned tasks and activities to be performed in accordance with the applicable requirements? Check number and qualifications of operator’s personnel			☐	☐	☐	☐	
1.5	ORO.GEN.210(e) ORO.AOC.135(b)	Does the operator ensure that all personnel are aware of the rules and procedures relevant to the exercise of their duties? Interview staff			☐	☐	☐	☐	
1.6	ORO.AOC.135(c)	Does the operator appoint sufficient number of personnel supervisors, taking into account the structure of the operator’s organisation and the number of personnel employed? Verify appointment letter, work contract or equivalent, evaluate in regard to their experience, knowledge, qualification and staff number			☐	☐	☐	☐	
1.7	ORO.AOC.135	How is the continuity of supervision in the absence of nominated persons assured? Verify deputization			☐	☐	☐	☐	

1.8	ORO.GEN.215 ORO.AOC.140	Does the operator have facilities allowing the performance and management of all planned tasks and activities in accordance with the applicable requirements? Verify offices, working space, operational support facilities, ground handling facilities, record keeping space at the home base, in relation to type and area of operations, needs of ground and flight crew, personnel concerned with operational control	☐	☐	☐	☐	
1.9	ORO.AOC.135	Are the nominated responsible persons contracted to work sufficient hours to fulfil the management functions associated with the scale and scope of the operation? Verify appointment letter, work contract or equivalent to determine contracted working hours and evaluate in regard to the scale and scope of operations	☐	☐	☐	☐	

Remarks:

Inspector's name and signature: