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Instructions for Use:

1. Check **YES** column if you reviewed the record or procedure to requirements and have no comment.
2. Check **NO** column if you reviewed the record, procedure or event and have a comment.
4. Enter the letter "**N/A**" in the column, if the line item is not required in this particular situation.
5. Enter any notes in remarks column regarding any **FINDING** that affects processing of the AOC
6. For later reference, proceed any notes with the appropriate question number.
7. For further guidance refer to Inspector Handbook Volume 4

AIR OPERATOR CERTIFICATE (AOC) APPLICATION ISSUE / RENEWAL / AMENDMENT FINAL REVIEW FSS-OPS-GEN FORM 167/12			
Activity Tracking Reference	Inspector's Name	Date Application Submitted	Date of Evaluation
Name of Operator or Applicant	Type of Application	Expiry Date (if applicable)	Contact Person and Phone No.

S/N	The following documents must be part of the application if required.	Regulatory Requirement	Assessment
1.	Application Form Completed		N/A <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/>
2.	Fees Paid (Receipt No:.....)		N/A <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/>
3.	POPS form completed and evaluated (if required)		N/A <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/>
4.	Revision Status of Operations Manuals/Foreign Operator Permit		N/A <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/>
5.	Operations Specifications (OPSPECS)		N/A <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/>
6.	Current Air Service License (ASL)		N/A <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/>
7.	Current Air Operator Certificate and Crew Licenses		N/A <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/>
8.	Valid Insurance		N/A <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/>
9.	Valid Certificate of Airworthiness		N/A <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/>

10.	Certificate of Registration		N/A <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/>
11.	Weight and Balance		N/A <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/>
12.	Maintenance Arrangements		N/A <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/>
13.	Recent CAA Base Inspection Report (before AOC Renewal)		N/A <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/>
14.	Latest Company Financial Audit Report		N/A <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/>
15.	Current Air Operator Certificate and OPSPECS reviewed		N/A <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/>
16.	A Letter authorising the Person/Company in Namibia to submit the application (if applicable)		N/A <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/>

