



Private Bag 12003 Windhoek Namibia | (Tel) +264 61 702 212 | Web: <http://www.dca.com.na>

FSS-AIR-FORM 060E/12

EVALUATE MAINTENANCE PROGRAMME SHORT TERM ESCALATION

INSPECTION RECORD
Name of Maintenance Organization
Physical Address (Location)
Aircraft Type
Date of Inspection
Maintenance Program Document No. Issue and date
Inspector(s)
Assessment Code: YES = Satisfactory; NO = Not Satisfactory; N/C = Not Checked; N/A = Not Applicable

Item	Assessment			
	YES	NO	N/C	N/A
I. Do the operator's short term escalation procedures accomplish the following:				
(a) List operator's management personnel authorized to approve short term escalation for-				
(i) Operations specifications time increase?				
(ii) Maintenance interval adjustment controlled by a reliability programme?				
(b) Define maximum limitations of short term escalation?				
(c) Contain criteria for data used to justify short term escalation?				
(d) Correspond with the overall programme to ensure that-				
(i) Repetitive AD, life limited parts and certification maintenance requirements are not escalated?				
(ii) Occurrences of repetitive short term escalation that indicate a need for a change in the maintenance programme are restricted?				
(iii) A method is provided for recording all escalation with provision for submitting and reporting escalations to the Authority?				

Inspectors Remarks



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Recommendations

The Short Term Escalation Programme has been evaluated in accordance with the Namibia Civil Aviation requirements currently in force and this checklist.

I DO / NOT / RECOMMEND the Reliability Program to be APPROVED.

Name of Inspector _____ Signature _____ Date _____

Chief Airworthiness Inspector - Remarks and Recommendation

Remarks:

I hereby **Approval / do not Approve** the Short Term Escalation Programme

Chief Airworthiness (Name) _____ Signature _____ Date _____