

### C.3. Administrator Checklist

ADMINISTRATOR CHECKLIST			
No	Item	Time	Initials
1.	Acknowledge callout and proceed to EMC, do not call for information.		
2.	Assume responsibility for room setup.		
3.	Check all bins are emptied, no further rubbish should not be emptied all should be sealed and kept for any investigation.		
4.	Take the emergency response box from the store cupboard using the EMC laminated layout chart place the following items at each location: a. Checklist. b. emergency log. c. 2 pens that work and a pencil. d. A headset (if available). e. Writing pad.		
5.	Place the full copy of the ERP at the Emergency Director's position.		
6.	Check that all electrical equipment PC, printer, fax, TV etc. is switched on and log on if you know the emergency password.		
7.	Place the 2 clocks in prominent positions and set time to: a. Local AUH time. b. UTC.		
8.	As team members arrive, record the time and names against function they will be representing, once the team is convened identify anyone leaving room and purpose, where they can be found and return time.		
9.	Note time EMC fully operational.		
10.	Keep comprehensive log of all activities.		
11.	Amend information's on the whiteboards as information comes in		
12.	Attend all emergency directors' briefings		
13.	Provide the Insurance Brokers/Underwriters with the following information (after authorisation obtained from the EMC Chairman): Date and time of the occurrence. a) Place of the occurrence (and routings if relevant). b) Details of any hull or hulls destroyed or damaged, including the name of the owner and likely amount of compensation. c) Particulars of persons killed or injured and, if available, their next-of-kin. d) Details of third-party property destroyed or damaged, including the name of the owner and likely amount of compensation to be claimed. e) Any available information as to the probable cause or causes of the catastrophe, persons responsible etc. f) Names and addresses of all available witnesses and where they can be located. g) Names and addresses of any person or firm carrying out investigative duties in relation to the occurrence and by whom they were appointed. h) Names and contacts of all company officials dealing with the occurrence and their designated location. i) Details of any charter operator or client involvement.		
14.	a) In conjunction with EMC and senior Legal Counsel, obtain the following original documents and arrange for them to be copied (min. 5 copies). All originals and one copy to be passed to EMC and copies held for Insurers by ADA Legal and EMC Admin.		

READ ONLY! \*\* Printed/Downloaded copies are considered UNCONTROLLED - Verify current issue before use\*\*

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	<ul style="list-style-type: none"> <li>b) Certificate of Registration.</li> <li>c) Certificate of Airworthiness.</li> <li>d) Flight Plan - list of the content of Flight Operations Bag, including relevant Falcon Radio or other Routing/Approach/Let Down Charts.</li> <li>e) Meteorological information/briefing to Flight Crew.</li> <li>f) Crew Manifest - General Declaration.</li> <li>g) Passenger Manifest together with details of nationality, sex and age, fatalities (including documents and details relating to identification, Death Certificates and post-mortem examinations), nature of non-fatal injuries, names and addresses of next-of-kin, hospital or funeral arrangements. Also, supply copies of any correspondence with passengers or next-of-kin or legal representatives and details of any Social Security or Compensation Claims.</li> <li>h) Load and Trim Balance Sheets or equivalent, details of C of G etc, plus pre-flight maintenance check or Clearance Certificate(s).</li> <li>i) Available photographs of wreckage of or damage to aircraft.</li> <li>j) Flight Crew Licenses. Route Training Details.</li> <li>k) Airframe/Engine/Rotor/Propeller Log-Books.*</li> <li>l) Transcript of R/T communications between the aircraft and the Tower/Approach/Area ATC as relevant.*</li> <li>m) Transcript from CVR.*</li> <li>n) Copy flight coupons or other flight document issued to passengers (with complete routing). Obtain passenger seating plan.</li> <li>o) General declaration or other manifest if applicable.</li> <li>p) Cargo Manifest - copy AWBs - details of damage to mail/freight/checked baggage. Details of dangerous or hazardous cargo.</li> <li>q) Certificates of Maintenance Review - copy last check-copy Tech Log/Snagging/ADD/Unserviceability Lists - relevant extracts from Flight Operations/Maintenance Manuals amended to the date of the accident.</li> <li>r) Documents relating to ownership of hull - purchase, leasing, charter and lien agreement(s).</li> <li>s) Airframe hours.</li> <li>t) Aircraft Serial No/time since new.</li> <li>u) Time since last major overhaul/last inspection.</li> <li>v) Engine Type/Model.</li> <li>w) Serial Numbers of engines.</li> <li>x) Time since new.</li> <li>y) Time since overhaul.</li> </ul>		
15.	<p>Details of Captain:</p> <ul style="list-style-type: none"> <li>a) Name</li> <li>b) Age</li> <li>c) License No</li> <li>d) Date of first issue</li> <li>e) Validations. Valid to</li> <li>f) Total flying hours</li> <li>g) Total hours on type</li> <li>h) Date of last proficiency check</li> <li>i) Date of last route check</li> <li>j) Date of last medical. Valid to</li> <li>k) Total flying time last 28, and 7 days + types flown</li> <li>l) Length of rest period to/from</li> <li>m) First Officer - Details as for Captain.</li> </ul>		

ADMINISTRATOR CHECKLIST			
No	Item	Time	Initials
	Cabin Crew: a) License No b) Issuing Authority c) Date of first issue d) Validations. Valid to e) Total flying hours f) Total hours on type g) Date of last proficiency check h) Date of last medical. Valid to i) Total flying time last 28, and 7 days + types flown j) Length of rest period to/from  Any cabin staff reports on the accident.		
16.	Details of any costs incurred or about to be incurred for reasons of safety or protection of the aircraft.		
17.	Notices served by the Aviation Authority relating to the investigation.		
18.	General conditions of carriage of passengers, cargo, tariffs etc.		
19.	Local press cuttings, copies of airline press releases and letters of condolence.		
20.	Details of hospitals and names of passengers/crew treated as patients and arrangements for repatriation.		
Remarks:			
<p>*Collection of this information will be a joint exercise between the OCC Supervisor and the EMC Administrator through other EMT members and Stakeholders*</p> <p><b>Note:</b> Turn-over this document after completion including other related documents (i.e. active logs, etc) to the EMC Administrator</p>			
End of Checklist			
Name and Signature:		Date:	