

QUALITY ASSUARANCE INSPECTORATE
ATC TOWER AND RADAR AUDIT CHECKLIST

Base/Station/Unit	
Date of Audit	
Reason for the Audit	Annual
Name of section representative	

Name(s) of Auditor(s):		
No	Rank	Name

Note - Specify applicability in the block indicating

Yes - √

No – X

Not applicable – N/A

1. PREVIOUS AUDIT

Description		Yes	No	Comments
1	Was the audit follow-up completed?			
1.1	Are there any outstanding audit findings with respect to previous audit			
2	Is there any additional operations Specifications or a change to the maintenance scope since the previous audit?			

2. GENERAL

Description		Yes	No	Comments
1	Do they have a quality policy and objectives?(5.2)			
2	Do they aware on quality policy and objectives? (7.3)			
3	Do they have nominated QAO,and IQAI for the Section?(7.1.2)			
4	Do they conduct quality audits in the Section? (9.2)			
5	Do they have displayed vision and mission in the Organization? (5.2)			
6	Do they have maintained organization charts for the Section?(5.3)			

3. MANAGEMENT

Description		Yes	NO	Comments
1	Is the organization, method of control and Supervision as per the AFO-201?			
2	Do their responsibilities defined in the job Description?(8.2.1)			
3	Does the management ensure that safety and quality Objectives are understood and maintained by all personnel? (7.4)			
4	Do they have aircrafts emergencies check list? (4.1.3)			
5	Do they have a proper shift handing over taking over method? (7.1)			
6	Do they have sufficient manpower to perform the job regularly? (7.1.2)			
7	Do they conducted Section conferences every month? (7.4)			
8	Are Orders, SOPs & CSN available? (CSN-CQAI Safety Newsletter) (7.4)			

9	Do they have sign orders every month? (7.5)			
10	Are adequate equipment provided for the Ops air personnel?			
11	Does the management review and follow up the audit reports? (6.2.1.F)			
12	Are they maintaining a satisfactory working environment? (7.1.4.C)			
13	Are they detailed personnel to maintain valuable equipment? (8.5.3.)			

4. ATC TOWER

Description		Yes	No	Comments
1	Do they have a list of communication equipment? (7.1.2)			
2	Do they have a continuation training program? (7.1.6)			
3	Do they have adequate training aids? (7.1.6)			
4	Do they have Calibrated barometer and ADDF set? (7.1.5.2)			
5	Do they have personnel files? (7.1.6.A)			
6	Do they record the outcomes during the personnel interviews? (7.1.6.A)			
7	Do they adhering to tower procedures? (7.1.6.A)			
8	Do they have adequate fire appliances? (6.2.1)			
9	Do they have displayed adequate safety posters? (7.1.3.D)			
10	Do they maintain proper environmental Condition inside the Section? (7.1.4.C)			
11	Do they practice 5S routing check? (7.1.1)			

5. DOCUMENT CONTROL

1	Do they maintain a DOB? (7.5.3.1)	Yes	No	
2	Do they maintain a Daily Serviceability State?(7.5.2)			
3	Do they maintain Runway inspection Log Book/File?			
4	Do they maintain document related to Run way lights chart and its serviceability? (7.1.3)			
5	Do they maintain Air Craft Movement Log Book?			
6	Do they maintain Crash Map? (7.5.3)			
7	Do they maintain NOTAM Register? (7.5.3)			
8	Do they maintain Weather Update Book? (7.5.3)			
9	Do they maintain servicing schedules on Navigational aids? (7.5.3)			
10	Do they maintain all Air staff orders? (7.5.3)			
11	Do they maintain an archive? (7.5.3)			
	<ul style="list-style-type: none"> Do they maintain archives In/Out register 			
	<ul style="list-style-type: none"> Do they have archives In/Out procedure 			
	<ul style="list-style-type: none"> Do they have a procedure for Safe custody of archives keys 			

6. PERSONNEL RECORD AND TRAINING

Description		Yes	No	Comments
1	Do they have approved training syllabus? (7.2.A)			
2	Do they conduct additional training classes? (7.2.C)			
3	Do they maintain an updated attendance register?			
4	Does the results of previously conducted training class accurate?			
5	Do they have Competency training syllabus? (7.2.D)			
6	Do they have conduct Competency training according to the programme? (7.2.D)			

7. SAFETY

	Description	Yes	No	Comments
1	Is the working area maintained properly? (7.1.4)			
2	Is there adequate lighting available? (7.1.4)			
3	Is the working environment? (7.1.4) <ul style="list-style-type: none"> Temperature suitable for work 			
	<ul style="list-style-type: none"> Lighting is satisfactory (7.1.4) 			
4	Do Section personnel aware about their duty to protect equipment from Lightening? (7.1.4)			
5	Do they have any unnecessary equipment?			
6	Is there a suggestion box?			
7	Do adequate safety posters available? (7.1.1)			
8	Is there an adequate electrical outlets available?			
8.1	Is extension cords are well secured?			
9	Is there a system for fire control? (7.1.4)			
10	<ul style="list-style-type: none"> Do they have adequate fire appliances in the correct category (7.1.4) 			
10.1	<ul style="list-style-type: none"> Do they Check fire appliances (Colour code) (7.1.4) 			
10.2	<ul style="list-style-type: none"> Do they check periodic on serviceability (7.1.4.B) 			
10.3	<ul style="list-style-type: none"> Is Fire plan displayed in the Section (7.1.4.B) 			
10.4	<ul style="list-style-type: none"> Do they conducted Fire drills (7.1.4.B) 			
11	Do they have first aid kits with the required medicines? (7.1.4.B)			
12	Is the hygienic condition of the rest room satisfactory? (7.1.4)			
13	Are exits and entrances free from obstruction?			
14	Do they have nominated Section personnel for Fire Fighting Plan? (6.2.1)			
15	Do they aware about their duties during a fire emergency? (6.2.2)			

8. COMMENTS / RECOMMENDATIONS

Date:

**Signature
QAI (AO)**

09 Suggestions /Recommendation

Date:

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**Signature
SOQA (AO)**

