



CAPABILITY LIST EVALUATION SHEET REQUEST

COMPONENT DATA

P/N to Add (*) :

(*) **Cross as required**

Component / Special (*) Name : asd

Vendor of Manufacture Code : asd

Aircraft Type : 320-200

ATA Chapter : 32-22-22

Workshop : asdsad

FOR RATING :

☒ DGCA RATING : Radio

☒ EASA RATING : Radio

Approval Request to carry out : Inspection / Testing / Repair / Modification / Overhauled (*)

(*) **CROSS as Required**

WORKSHOP GENERAL MANAGER STATEMENT

I certify that my department has the capability to maintain the above mentioned items, according to the AMO Manual 1.9.3 requirements :

Facilities	<input checked="" type="checkbox"/>	Qualified Personnel	<input checked="" type="checkbox"/>
Special Tool	<input checked="" type="checkbox"/>	Approved Data	<input checked="" type="checkbox"/>
Special Equipment/Test Equipment	<input checked="" type="checkbox"/>	Appropriate Rating	<input checked="" type="checkbox"/>

Workshop General Manager

Date :

Reviewed & Disposed by Lead Auditor

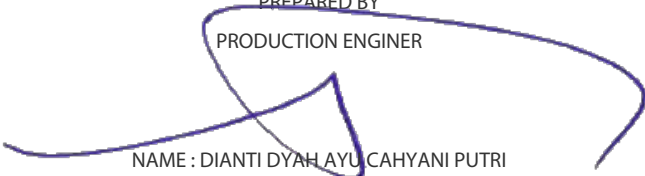
☐ Approved ☐ Disapproved

Reason of Disapproval:


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SHOP MAINTENANCE : asdsad				SHOP ABILITY		NO. asdasd	
Description :				TYPE MODEL : asd		CAPABILITY LEVEL	
PART NUMBER : NAS75-4-024:81205				NOMENCLATURE : asd		<input checked="" type="checkbox"/> INSPECTION	
TBO : asd				MANUFACTURER : asd		<input checked="" type="checkbox"/> Repair	
CHECK PERIOD : asd				AIRCRAFT TYPE : 320-200		<input checked="" type="checkbox"/> TESTING	
				ATA CHAPTER : 32-22-22		<input checked="" type="checkbox"/> MODIFICATION	
				SYSTEM : asdsad		<input checked="" type="checkbox"/> OVERHAULED	
				Document : Doc No asd,Rev. asd Rev Date 2019-04-23			
TEST EQUIPMENT				SPECIAL TOOLS			
PART NUMBER	PART NAME	AVAILABLE	REMARKS	PART NUMBER	PART NAME	AVAILABLE	REMARKS
asd	sad	Yes	asd	asd	asd	Yes	asd
asd	asd	No	asd				

SHOP MAINTENANCE : asdsad				SHOP ABILITY		NO. asdasd	
<input checked="" type="checkbox"/> INSPECTION <input checked="" type="checkbox"/> Repair <input checked="" type="checkbox"/> TESTING <input checked="" type="checkbox"/> MODIFICATION <input checked="" type="checkbox"/> OVERHAULED		AVAILBILE QUALIFIED PERSONEL : Nominate Certifying Staff : MASDUKI / 524105 Nominate Technician : HARRI BAGUS ASDWianto / 533343 DEKA WYNALBA JASDO / 582123		Test Condition : Temp(min) : asdsad Humidity(max): dsad Temp(max) : asd Press(min) : das Humidity(min): dasd Press(max) : da Others : Storage Condition : Temp(min) : dasd Humidity(max): dasd Temp(max) : dasd Press(min) : sad Humidity(min): dasd Press(max) : dsad Others :			
MATERIAL PLANNING				MANHOURS PLANNING			
No	PART NUMBER	DESCRIPTION	QTY	No	TASK NAME	MAN HOURS	MAN POWER
1	asd		34	1	asd		32
2	asd		334	2	asd		3434
3				3	asd		34
4				4	asd		34

SHOP MAINTENANCE : asdsad		SHOP ABILITY		NO. asdasd
15. CONSUMABLE MATERIAL				
NO	PART NUMBER	DESCRIPTION	QTY	REMARKS
1	asd	asd	32	asdsad
2	asd	asd	22	asdsad
<div>PREPARED BY PRODUCTION ENGINEER  NAME : DIANTI DYAH AYU CAHYANI PUTRI DATE : 22 April 2019</div>			<div>CHECKED BY PRODUCTION ENGINEER NAME : DATE :</div>	



EQUIVALENT TOOL/EQUIPMENT ANALYSIS REPORT					No. aasd	
Tool/Equipment Category		<input type="checkbox"/> 2 <input checked="" type="checkbox"/> 3 <input type="checkbox"/> 4	Original Issued Date : 2019-04-10			
			Rev : asd Issued Date : 2019-04-10			
Distribution	: asd	TQC				
EFFECTIVITY						
<input type="checkbox"/> Aircraft			<input checked="" type="checkbox"/> Aircraft Component			
Aircraft or A/C Company type			: 320-200		ATA	: 32-22-22
Description			: asd			
Part Number			: NAS75-4-024:81205		Doc No	: asd
Manufacturer			: asd			
REASON OF ISSUANCE : asd						
EFFECT ON MAINTENANCE PROCEDURE : <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES						
<input checked="" type="checkbox"/> TEST		<input checked="" type="checkbox"/> DIASSEMBLY		<input type="checkbox"/> ASSEMBLY		<input type="checkbox"/> CLEANING
<input checked="" type="checkbox"/> INSPECTION		<input checked="" type="checkbox"/> TROUBLE SHOOTING		<input type="checkbox"/> REPAIR		<input type="checkbox"/> FITS AND CLEARANCE
Reason of Revision : asd						
RECOMENDED TOOL/EQUIPMENT				ALTERNATE TOOL/EQUIPMENT		
Name		asd		Name		asd
Model/Type		sad		Model/Type		asd
P/N		asd		P/N		asd
Manufacturer		asd		Manufacturer		asd
Prepared by :  DIANTI DYAH AYU CAHYANI PUTRI / 582499 FINANCIAL ANALYST				Approved by : (Signature) Name of qsa position		
Date		: 22 April 2019		Date		:



EQUIVALENT TOOL/EQUIPMENT ANALYSIS REPORT (CONTINUED)							No : aasd			
MAINTENANCE TAS REFERENCE										
<input checked="" type="checkbox"/> Airworthiness Directives(AD) No.							: asdsad			
<input type="checkbox"/> Component Maintenance Manual (CMM)							:			
<input type="checkbox"/> Aircraft Maintenance Manual (AMM)							:			
<input type="checkbox"/> Service Bulletin (SB) No.							:			
<input type="checkbox"/> Others (Specify)							:			
RECOMENDED TOOL/EQUIPMENT REFERENCE							ALTERNATE TOOL/EQUIPMENT REFERENCE			
<input checked="" type="checkbox"/> Wiring Diagram : 1							<input checked="" type="checkbox"/> Wiring Diagram : 1			
<input type="checkbox"/> Tool/Equipment Manual(TM) :							<input type="checkbox"/> Tool/Equipment Manual(TM) :			
<input type="checkbox"/> Tool/Equipment Specification(TS) :							<input type="checkbox"/> Tool/Equipment Specification(TS) :			
<input type="checkbox"/> Aircraft Maintenance Manual :							<input type="checkbox"/> Aircraft Maintenance Manual :			
<input type="checkbox"/> Other (Specify) :							<input type="checkbox"/> Other (Specify) :			
RELATED MAINTENANCE TASK TO BE PERFORMED										
Maintenance Task				Maintenance Task Vs Recomend Tool/Equipment			Maintenance Task Vs Alternate Tool/Equipment			Compliance
Ref	Page/Parag	Description	Acceptable Result	Ref	Page/Parag	Requirements	Ref	Page/Parag	Requirements	
asd	asd	asdasd	asdsa	dasdsad	asd	dasd	dasd	dasd	dasd	1
Note : asdsadsad										