



# ATEL/ANAV Service Provider Certificate Checklist

Reference: CASR Part 171 and MOS Part 171

The processing officer(s) must complete this checklist to ensure that each step of the application process is completed prior to issuing a Certificate to an ATEL/ANAV provider.

Tick each box to indicate the satisfactory completion of the task. Also note the date of completion of each task against the box.

Sign and date this form and file it on the appropriate file when the process is completed.

File raised _____ File No. _____		Compliance with MOS Chapters	
1	Acknowledgment of applicant's application within 7 days <input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>
2	Face-to-face meeting <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
3	Operations Manual provided by the applicant <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>
4	Application checked for completeness <input type="checkbox"/>	7 <input type="checkbox"/>	8 <input type="checkbox"/>
5	Documentation assessed against CASR Part 171 and MOS 171 <input type="checkbox"/>	9 <input type="checkbox"/>	
6	Applicant assessed as being able to provide a service <input type="checkbox"/>		
7	Certification granted/declined <input type="checkbox"/>		
8	Applicant advised of outcome <input type="checkbox"/>		
9	Certificate issued <input type="checkbox"/>		
10	Operations Manual documentation manual/s endorsed and returned <input type="checkbox"/>		
11	RS Division notification completed and data entered on ASSP <input type="checkbox"/>		
12	Notify Compliance Division of new provider to be included in their audit schedule <input type="checkbox"/>		
13	New provider listed on the CASA web page <input type="checkbox"/>		
14	Ensure compliance with entry in Air Navigation Documentation—e.g. ERSA/NOTAM <input type="checkbox"/>		
15	<input type="checkbox"/>		
16	<input type="checkbox"/>		

Signed: ..... Date: ..... / ..... / .....

Name and Position: ..... Assessing Officer