

## DOCUMENT INITIAL REVIEW FORM - GOM

(GACAR PART 151)

|              |                                |
|--------------|--------------------------------|
| Document(s)  | Ground Operations Manual (GOM) |
| Organization |                                |
| Issue Date   |                                |
| Review Date  |                                |

|                    |                  |                    |                    |
|--------------------|------------------|--------------------|--------------------|
| <b>Conformance</b> | S = Satisfactory | U = Unsatisfactory | X = Not Applicable |
|--------------------|------------------|--------------------|--------------------|

| Item      | Subject / Subtopic                                                                                                                        | S                        | U                        | X                        |
|-----------|-------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|--------------------------|--------------------------|
| <b>1.</b> | <b>General / Administration</b>                                                                                                           |                          |                          |                          |
| 1.1       | Issue / Edition Number and Effectivity / Validity Date                                                                                    | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 1.2       | Company Name, Location, and Contact Details                                                                                               | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 1.3       | List of Effective Pages (can be merged with item 1.4)                                                                                     | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 1.4       | Record of Revision (date and page included)                                                                                               | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 1.5       | Distribution List                                                                                                                         | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 1.6       | Table of Contents (comprehensive not fragmented)                                                                                          | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 1.7       | Definitions / Abbreviations                                                                                                               | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 1.8       | Appendices / List and Sample of Forms                                                                                                     | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 1.9       | Company Description / Information                                                                                                         | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 1.10      | Corporate Mission & Vision                                                                                                                | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 1.11      | Shareholder / Ownership Structure                                                                                                         | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 1.12      | Scope of Services (as per Part-151 Application / Certificate)                                                                             | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 1.13      | Manual Review, Amendment Procedure (including Notification to the President for Acceptance of Revisions)                                  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 1.14      | Organization's Safety Policy                                                                                                              | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 1.15      | Organization's Quality Policy (can be merged with items 1.14 and 11.1)                                                                    | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 1.16      | Document Administration and Control Procedures                                                                                            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 1.17      | Statement Signed by the Accountable Executive confirming the compliance with GACAR Part 151 at all times                                  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 1.18      | Delegation of Authority (in absence)                                                                                                      | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 1.19      | Duties and Responsibilities of nominated Post holders (must conform to GACAR 151.45 and 151.101(g))                                       | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 1.20      | Organizational Structure & Chart                                                                                                          | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 1.21      | Station(s) Organization Chart(s) (if not in the Local Supplement Manuals)                                                                 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 1.22      | Duties & Responsibilities of Management and Supervisory Personnel (covering all functions / titles described in the Organizational Chart) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 1.23      | Notification of Organizational Changes (including notification of the President for acceptance of the nominated post-holders)             | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 1.24      | General Description of Manpower Resources (required manpower and reference ground rules for staff deployment relevant to each function)   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 1.25      | Fatigue Management Program – GACAR 151, Subpart G                                                                                         | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 1.26      | Description of Facilities and Equipment (list of GSE)                                                                                     | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 1.27      | Education & Prevention Programs for the Problematic Use of Psychoactive Substances                                                        | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 1.28      | Evaluation and Subcontracting of Ground Services                                                                                          | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 1.29      | List of Subcontracted Organizations (consistent with the GSP Application)                                                                 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

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|           |                                                                                                                                                                                    |                          |                          |                          |
|-----------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|--------------------------|--------------------------|
| 1.30      | Mandatory Safety Occurrence Reporting                                                                                                                                              | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 1.31      | Voluntary Safety / Hazard Reporting                                                                                                                                                | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 1.32      | Health and Safety Management Program – AHM 617                                                                                                                                     | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 1.33      | Human Factors Program - AHM 616                                                                                                                                                    | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|           | (a) Implementation of Human Factors in Airside Operations                                                                                                                          | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|           | (b) Safety Culture Initiatives & Reporting                                                                                                                                         | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|           | (c) Establishment of a Just Culture Model                                                                                                                                          | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|           | (d) Human Factors Initial & Recurrent Training (details or reference)                                                                                                              | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|           | (e) Procedure Compliance Initiatives (details or reference)                                                                                                                        | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|           | (f) LOSA (Line Operations Safety Assessment) Monitoring<br><b>Remark:</b> Details in ICAO Doc. 9803 adapted to ground operations re AHM 616                                        | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 1.34      | Environmental Plan and Policies (can be a separate document)                                                                                                                       | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 1.35      | Details of, or Reference to, the GSE Maintenance Program<br><b>Remark:</b> can be a separate document                                                                              | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|           | (a) Include preventive maintenance schedule for each GSE specifying maintenance tasks and frequencies.                                                                             | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|           | (b) Refers or describes manufacturer's program and recommendations for each maintenance task (can be more stringent than manufacturer)                                             | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 1.36      | Details of, or Reference to, Organization's Quality Management System<br><b>Remark:</b> Can be a separate document                                                                 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 1.37      | Details of, or Reference to, Organization's Safety Management System<br><b>Remark:</b> Can be a separate document                                                                  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 1.38      | Details of, or Reference to, Emergency Response Plan (ERP)<br><b>Remark:</b> Can be a separate document                                                                            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 1.39      | Details of, or Reference to, Contingency Procedures<br><b>Remark:</b> Can be merged with the ERP                                                                                   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|           | (a) Loss of Information & Telecommunication Systems (ITC)                                                                                                                          | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|           | (b) Loss of Power in own Facilities                                                                                                                                                | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|           | (c) Airport Key Systems Failure (relevant to operation, e.g. CUTE, BHS, BRS)                                                                                                       | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|           | (d) Other Contingency Procedures Relevant to Scope of Services                                                                                                                     | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 1.40      | Complete Set of Standard Operating Procedures (SOP) Relevant to Scope of Services<br><b>Remark:</b> Below items refer – ensure all activities within Scope of Services are covered | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <b>2.</b> | <b>Passenger Handling</b>                                                                                                                                                          |                          |                          |                          |
| 2.1       | Passenger Departure – IGOM 1.1                                                                                                                                                     | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|           | (a) Pre-departure Activities                                                                                                                                                       | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|           | (b) Passenger Check-in                                                                                                                                                             | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|           | (c) Baggage Drop-off                                                                                                                                                               | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|           | (d) Travel Documents Verification                                                                                                                                                  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|           | (e) Passenger Acceptance                                                                                                                                                           | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|           | (f) Flight Documents                                                                                                                                                               | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|           | (g) Passenger Boarding                                                                                                                                                             | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|           | (h) Post-flight Departure Activities                                                                                                                                               | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2.2       | Passenger Security – IGOM 1.2                                                                                                                                                      | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|           | (a) Security of Documents                                                                                                                                                          | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|           | (b) Passenger Suitability for Travel                                                                                                                                               | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

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|                   | (c) Security of Passengers & their Baggage                             | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2.3               | Passenger Arrival, Transfer and Transit – IGOM 1.3                     | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|                   | (a) Pre-arrival                                                        | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|                   | (b) Arrival                                                            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|                   | (c) Transfer                                                           | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|                   | (d) Transit                                                            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2.4               | Special Categories of Passengers – IGOM 1.4                            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|                   | (a) Unaccompanied Minors                                               | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|                   | (b) Infants & Children                                                 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|                   | (c) Groups                                                             | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|                   | (d) Passengers Requiring Assistance (RPM, Visual / Hearing Impairment) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|                   | (e) Passengers Requiring Medical Clearance                             | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|                   | (f) PRMs not Requiring Medical Clearance                               | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|                   | (g) Service Animals                                                    | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|                   | (h) Stretcher Case                                                     | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|                   | (i) Oxygen for Medical Use                                             | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|                   | (j) Inadmissible Passengers & Deportees                                | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2.5               | (k) Unruly Passengers                                                  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|                   | Passenger Irregularities – IGOM 1.5                                    | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|                   | (a) General Irregularity Guidelines                                    | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|                   | (b) Delays                                                             | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|                   | (c) Misconnections / Cancellations / Diversions                        | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|                   | (d) Involuntary Change of Class                                        | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|                   | (e) Denied Boarding                                                    | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <b>3.</b>         | <b>Baggage Handling</b>                                                |                          |                          |                          |
| 3.1               | Cabin Baggage – IGOM 2.1                                               | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3.2               | Checked Baggage – IGOM 2.2                                             | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|                   | (a) Excess Baggage                                                     | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|                   | (b) Baggage Tags                                                       | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|                   | (c) Baggage Destination                                                | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3.3               | Special Baggage – IGOM 2.3                                             | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|                   | (a) Bulky & Oversized Baggage (OOG)                                    | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|                   | (b) Cabin Seat Baggage                                                 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|                   | (c) Crew Baggage                                                       | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|                   | (d) Delivery at Aircraft (DAA)                                         | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|                   | (e) Sporting Equipment                                                 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|                   | (f) Wheelchairs & Mobily Aids                                          | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| (g) Handling Pets | <input type="checkbox"/>                                               | <input type="checkbox"/> | <input type="checkbox"/> |                          |
| 3.4               | Baggage Handling – IGOM 2.4                                            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|                   | (a) Baggage Room Preparation                                           | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|                   | (b) Baggage Sorting                                                    | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

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|           |                                                                                  |                          |                          |                          |
|-----------|----------------------------------------------------------------------------------|--------------------------|--------------------------|--------------------------|
|           | (c) Baggage Cut-off & ULD Load Verification Process                              | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|           | (d) Removal of Checked Baggage                                                   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|           | (e) Transfer Baggage & Special Cases                                             | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|           | (f) Short Connection Baggage                                                     | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3.5       | Baggage Security – IGOM 2.5                                                      | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|           | (a) Handling of Hold Baggage                                                     | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|           | (b) Carriage of Weapons                                                          | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|           | (c) Security Removed Items                                                       | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|           | (d) Transfer and Connecting Baggage                                              | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|           | (e) Baggage Reconciliation                                                       | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|           | (f) Dangerous Goods in Baggage                                                   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|           | (g) Baggage Theft & Pilferage Prevention                                         | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3.6       | Mishandled Baggage – IGOM 2.6                                                    | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|           | (a) Storage & Handling of Mishandled / Unidentified / Unclaimed Baggage          | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|           | (b) Mishandled Mobility Aids                                                     | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|           | (c) Live Animals                                                                 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|           | (d) Legal Time Limits for Reporting                                              | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|           | (e) Baggage Tracing                                                              | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <b>4.</b> | <b>Cargo &amp; Mail Handling</b>                                                 |                          |                          |                          |
| 4.1       | Booking & Planning of Shipments                                                  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4.2       | Reception & Transfer of Shipments (incl. from/to shippers, forwarders, airlines) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4.3       | Cargo Trucking Procedures                                                        | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4.4       | Cargo & Mail Handover Processes                                                  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4.5       | Cargo Storage & Warehouse Operations – General                                   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|           | (a) Warehouse Equipment & Maintenance                                            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|           | (b) Compliance with Customs Requirements                                         | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|           | (c) Warehouse Security Arrangements                                              | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|           | (d) Cargo Electronic Data Processing (EDP) Processing                            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|           | (e) ULD Storage & Inventory Control                                              | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4.6       | (f) Special Cargo Storage Requirements                                           | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|           | Cargo & Mail Safety & Security – General (Can be covered in item 11)             | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4.7       | Import Cargo Handling Procedures                                                 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|           | (a) Cargo Flight Handling                                                        | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|           | (b) Import Cargo Ramp Handling & Transfer                                        | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|           | (c) Cargo Delivery                                                               | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|           | (d) Cargo Warehousing                                                            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|           | (e) Cargo Clearance                                                              | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|           | (f) Cargo Customer Services                                                      | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|           | (g) Commercial & Revenue                                                         | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4.8       | Export Cargo Handling Procedures                                                 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|           | (a) Acceptance of General Cargo                                                  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

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|           | (b) Acceptance & Handling of Dangerous Goods                  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|           | (c) Acceptance & Handling of Special Cargo                    | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|           | (d) Acceptance & Handling of Human Remains                    | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|           | (e) Acceptance, Stowage, and Handling of Live Animals         | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|           | (f) Acceptance & Handling of Perishables                      | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|           | (g) Acceptance, Handling, and Protection of Valuable Cargo    | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|           | (h) Acceptance & Handling of Heavy Cargo                      | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|           | (i) Acceptance & Handling of Unaccompanied Baggage            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|           | (j) Acceptance & Handling of Courier & Express Cargo/Mail     | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|           | (k) Acceptance & Handling of Diplomatic Mail                  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|           | (l) Export Cargo Manifest                                     | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|           | (m) Export Cargo Screening & Security                         | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|           | (n) Export Cargo Ramp Handling & Transfer                     | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4.9       | Mail Handling & Documents – AHM 350/351                       | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4.10      | Cargo & Mail Irregularities – General                         | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4.11      | Found Cargo & Mail                                            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4.12      | Handling of Damaged Cargo                                     | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4.13      | Handling of Damaged Mail                                      | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4.14      | Handling of Pilfered Cargo – AHM 321                          | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4.15      | Handling of Wet Cargo – AHM 322                               | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4.16      | Handling of Infectious Substances                             | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4.17      | Information and Data Transmission to Load-Control             | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4.18      | Cargo ULD Breakdown, Delivery, in Transit and Transfer        | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4.19      | Cargo ULD Build-up                                            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4.20      | Cargo Preparation for Flight                                  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <b>5.</b> | <b>Aircraft Turn-Around</b>                                   |                          |                          |                          |
| 5.1       | Aircraft Turnaround Basics & Plan                             | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5.2       | Turnaround Coordination & Supervision Requirements – IGOM 6.3 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|           | Aircraft Arrival – IGOM 4.1                                   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5.3       | (a) Standard Arrival Procedures                               | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|           | (b) GSE on Aircraft Arriving                                  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5.4       | Aircraft Chocking – IGOM 4.2                                  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5.5       | Aircraft Coning – IGOM 4.3                                    | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|           | Aircraft Doors – IGOM 4.4                                     | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5.6       | (a) Safety Requirements                                       | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|           | (b) Cabin Access Doors                                        | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|           | (c) Cargo Hold Doors                                          | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|           | Aircraft Loading & Offloading – IGOM 4.5                      | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5.7       | (a) Supervision of Loading                                    | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|           | (b) Safety Requirements                                       | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|           | (c) Loading Precautions                                       | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

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|           |                                                                |                          |                          |                          |
|-----------|----------------------------------------------------------------|--------------------------|--------------------------|--------------------------|
|           | (d) Bulk Compartments                                          | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|           | (e) Cargo Loading Systems (containerized aircraft)             | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|           | (f) Cargo Loader Operations (lower deck, main deck)            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|           | (g) Preparation for Aircraft Loading (incl. cargo)             | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|           | (h) Loading Procedures                                         | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|           | (i) Live Animals                                               | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|           | (j) Wet Cargo                                                  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|           | (k) Securing of Load                                           | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|           | (l) Load Spreading                                             | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|           | (m) Unit Load Devices (ULD) – Refer to Item 9                  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|           | (n) Spills in Cargo Holds                                      | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|           | (o) Cargo Hold Inspection                                      | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|           | (p) Advance Loading Preparation                                | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|           | (q) Aircraft Ground Stability                                  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|           | (r) Offloading Procedures                                      | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|           | Aircraft Departure & Open Ramp Departure – IGOM 4.6 & IGOM 4.8 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|           | (a) Actions Prior to Departure                                 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|           | (b) Pre-departure Check                                        | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|           | (c) Wheel Chock Removal                                        | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|           | (d) Pre-departure Table                                        | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5.8       | (e) Anti-collision Lights                                      | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|           | (f) Engine Start using APU                                     | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|           | (g) Engine Cross-bleed Start                                   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|           | (h) Communication Requirements                                 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|           | (i) Departure Communications                                   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|           | (j) Nose Gear Steering                                         | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|           | (k) Maneuvering during Adverse Weather                         | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|           | Aircraft Pushback & Towing Operations – IGOM 4.7 & 4.9         | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|           | (a) Actions before Pushback                                    | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|           | (b) Safety Precautions & Incidents (all types of equipment)    | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|           | (c) Preparation for Pushback                                   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|           | (d) Power Push Unit & Procedure                                | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|           | (e) Tow-bar Unit & Procedure                                   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5.9       | (f) Towbarless Unit & Procedure                                | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|           | (g) Open Ramp (Taxi-through Stands) Departure                  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|           | (h) Aircraft Towing Requirements                               | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|           | (i) Aircraft Towing Operations                                 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|           | (j) Towing Maneuvering                                         | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|           | (k) Towing Limits                                              | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <b>6.</b> | <b>Ramp Safety &amp; Servicing Operations</b>                  |                          |                          |                          |
| 6.1       | Ramp Safety in Aircraft Handling - IGOM 3.1                    | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

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|      |                                                                                                                                             |                          |                          |                          |
|------|---------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|--------------------------|--------------------------|
|      | (a) General Ramp Safety Principles                                                                                                          | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|      | (b) Safety Instructions for GSE Operation on the Ramp                                                                                       | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|      | (c) FOD Prevention – AHM 635                                                                                                                | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 6.2  | Safety During Fueling / Defueling – IGOM 3.2                                                                                                | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|      | (a) Fuel Safety Zone                                                                                                                        | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|      | (b) Fuel Spillage                                                                                                                           | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|      | (c) Fueling with Passengers on Board                                                                                                        | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 6.3  | Hand Signals – IGOM 3.4                                                                                                                     | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|      | (a) Conditions for Using Hand Signals                                                                                                       | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|      | (b) Hand Signals for GSE                                                                                                                    | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|      | (c) Pushback Hand Signals (Headset Operator to Tug Driver)                                                                                  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|      | (d) Pushback Hand Signals (Wing walker to Headset Operator / Tug Driver)                                                                    | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|      | (e) Marshalling Hand Signals for Aircraft                                                                                                   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|      | (f) Technical / Servicing Hand Signals (Ground Staff to Flight Crew)                                                                        | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|      | (g) Technical / Servicing Hand Signals (Flight Crew to Ground Staff)                                                                        | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 6.4  | Ground Power Unit (GPU) Servicing                                                                                                           | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 6.5  | Pre-Conditioned Air (PCA) Servicing                                                                                                         | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 6.6  | Air Starter Unit (ASU) Servicing                                                                                                            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 6.7  | Use of Passenger Steps                                                                                                                      | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 6.8  | Use of Passenger Boarding Bridge                                                                                                            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 6.9  | Use of Passenger Buses                                                                                                                      | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 6.10 | PRM / High-loader Vehicle Servicing                                                                                                         | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 6.11 | Potable Water Servicing – IGOM 3.6                                                                                                          | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|      | (a) General Hygiene Precautions                                                                                                             | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|      | (b) Potable Water Unit Servicing Procedures                                                                                                 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 6.12 | Toilet Servicing – IGOM 3.5                                                                                                                 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|      | (a) Hygiene Precautions                                                                                                                     | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|      | (b) Toilet Servicing Procedure                                                                                                              | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 6.13 | Catering Servicing                                                                                                                          | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 6.14 | Aircraft Cabin Servicing & Cleaning – IGOM 3.7                                                                                              | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|      | (a) Aircraft Dressing & Cleaning                                                                                                            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|      | (b) Cleaning Equipment                                                                                                                      | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|      | (c) Health & Safety Instructions                                                                                                            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|      | (d) Lost & Found / Damage / Suspicious Items                                                                                                | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|      | (e) Garbage Disposal                                                                                                                        | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 6.15 | Aircraft Exterior Cleaning                                                                                                                  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|      | (a) Cleaning Procedures                                                                                                                     | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|      | (b) List of Approved Cleaning Agents                                                                                                        | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|      | (c) Covering and Uncovering of Aircraft Sensitive Sensors/Probs (to be performed or/and inspected by a Part-66 licensed aircraft mechanic). | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|      | (d) Approved Airline Procedures to be Followed                                                                                              | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 6.16 | Deicing / Anti-Icing Operations – IGOM 3.8                                                                                                  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

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|           |                                                                         |                          |                          |                          |
|-----------|-------------------------------------------------------------------------|--------------------------|--------------------------|--------------------------|
|           | (a) Personnel Safety                                                    | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|           | (b) Open Basket Operations                                              | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|           | (c) Closed Basket Operations                                            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 6.17      | Adverse Weather Conditions – IGOM 3.3                                   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|           | (a) Slippery/Contaminated Apron Conditions                              | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|           | (b) Storms – Lightning                                                  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|           | (c) High Wind Conditions & Activity Table                               | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|           | (d) Low Visibility & Sandstorms                                         | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|           | (e) Intense Heat                                                        | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <b>7.</b> | <b>Airside Safety Operational Oversight</b>                             |                          |                          |                          |
| 7.1       | Scope of Supervision – IGOM 6.2                                         | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 7.2       | Reporting (Incidents, Accidents, & Near Misses) – IGOM 6.4              | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 7.3       | Airside Investigation Procedure – IGOM 6.5                              | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 7.4       | Monitoring Procedure – IGOM 6.6                                         | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|           | (a) Ramp Safety – General                                               | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|           | (b) Aircraft Arrival & Offload Checklists                               | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|           | (c) Boarding & De-boarding of Passengers                                | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|           | (d) Loading & Off-loading (Cargo Loaders, Conveyor Belts, High Loaders) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|           | (e) Lavatory Servicing                                                  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|           | (f) Potable Water Servicing                                             | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|           | (g) Aircraft Onload & Departure Checklists                              | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|           | (h) Ground Support Equipment Checklists                                 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|           | (i) Fueling Operations                                                  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|           | (j) Catering Operations                                                 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|           | (k) Cabin Servicing                                                     | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|           | (l) Anti / De-icing Operations                                          | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <b>8.</b> | <b>Load Control</b>                                                     |                          |                          |                          |
| 8.1       | Load Control Principles – IGOM 5.2                                      | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 8.2       | Regulatory Requirements – IGOM 5.3                                      | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 8.3       | Load Control Tasks – IGOM 5.4                                           | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|           | (a) Load Planning                                                       | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|           | (b) Aircraft Loading & Supervision                                      | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|           | (c) Load Information Exchange                                           | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|           | (d) Reporting Actual Load                                               | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|           | (e) Notification to the Captain (NOTOC)                                 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|           | (f) Weight & Balance Calculation                                        | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|           | (g) Weight Recording – IGOM 5.11                                        | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|           | (h) Departure Control System (DCS) Process                              | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|           | (i) Post-departure Message Task                                         | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 8.4       | Load Control Task Job Responsibility – IGOM 5.5                         | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 8.5       | Qualification Requirements – IGOM 5.6                                   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

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|            |                                                                                   |                          |                          |                          |
|------------|-----------------------------------------------------------------------------------|--------------------------|--------------------------|--------------------------|
| 8.6        | Documentation – IGOM 5.7                                                          | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 8.7        | Information and Procedures for: (ISAGO LOD 1.1)                                   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|            | (a) Provision of Info Required for Weight & Balance Calculation                   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|            | (b) Use of Operator-approved Coding Scheme, passenger, & Baggage Weights          | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|            | (c) Calculating & Communicating Provisional Load Planning Data                    | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|            | (d) Load Planning and Load Instruction Report (LIR) Production                    | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|            | (e) Supervision of the Loading and Offloading of Aircraft                         | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|            | (f) Reporting and Recording the Loading of the Aircraft and Load Finalization     | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|            | (g) EDP Load sheet Production                                                     | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|            | (h) Manual Load sheet Production                                                  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|            | (i) Last Minute Change Process (LMC)                                              | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|            | (j) Managing Discrepancies                                                        | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|            | (k) Transmission of Post-departure Messages and Reports                           | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|            | (l) Records & Filing                                                              | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|            | (m) Roles & Responsibilities                                                      | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 8.8        | Load Control Process Flow – IGOM 5.8                                              | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|            | (a) Flow Scheme                                                                   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|            | (b) Flow Legend                                                                   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <b>9.</b>  | <b>ULD Control</b>                                                                |                          |                          |                          |
| 9.1        | ULD Build Up and Breakdown – AHM 426                                              | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 9.2        | Types / Categories of ULD                                                         | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 9.3        | Storage of ULD – AHM 421                                                          | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 9.4        | Control of Transferred ULD – AHM 422                                              | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 9.5        | Acceptable Standards for the Interchange of ULD – AHM 340                         | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 9.6        | Serviceability / Airworthiness Inspection of ULD – AHM 425                        | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 9.7        | Tagging of ULD – AHM 420                                                          | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 9.8        | ULD Transportation – AHM 427                                                      | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 9.9        | ULD Stock & Device Control Messages – AHM 423 & AHM 424                           | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <b>10.</b> | <b>Dangerous Goods</b>                                                            |                          |                          |                          |
| 10.1       | Compliance with GACAR Part 109                                                    | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 10.2       | Explicitly refer to current IATA / ICAO DGR edition used                          | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 10.3       | Relevant DG Training Category is clearly defined for each applicable job function | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

