

## SMS APPLICATION

### Part-1 (To be filled by the applicant)

<b>Name of Certificate Holder/Service Provider</b>		<b>Address of Certificate Holder/Service Provider</b>				
<b>Type of Certificate Holder/Service Provider (Mark one)</b>	<input type="checkbox"/> <i>Air operator</i>	<input type="checkbox"/> <i>ANS</i>	<input type="checkbox"/> <i>Airport operator</i>	<input type="checkbox"/> <i>Ground Handler</i>	<input type="checkbox"/> <i>Training org.</i>	<input type="checkbox"/> <i>Maintenance Org</i>
<b>Reference Number of GACA Certificate held (or to be)</b>	No. ....					<input type="checkbox"/> N/A

**1. Please accord GACA acceptance of SMS of my organization.**

**2. Following documents are attached:**

- a) SMS manual (SMM)
  - b) SMS Implementation Plan (IP) & Gap Analysis
  - c) Emergency Response Plan (ERP)
  - d) Key Performance Indicators (KPIs)
  - e) CV of Director Safety/SMS Manager
  - f) List of other relevant documents
- (Soft copies -searchable PDF- of all documents are highly encouraged for an expedited processing)

**3. It is certified that:**

- a) all applicable requirements are fully complied with
- b) the accepted SMS will be fully implemented
- c) KPIs are established to the satisfaction of GACA
- d) Director of Safety meets GACA standards

**APPLICANT:**

..... **SMS MANAGER** .....

*Name:* *Title:* *Signature:*

.....

*Date of application:* *Telephone:* *E-mail:*

### Part-2 (For GACA S&R Use)

<b>Comments of GACA specialist Department</b>	<input type="checkbox"/> <i>SATISFACTORY</i>	<input type="checkbox"/> <i>UNSATISFACTORY</i> <i>(Attach extra sheets as required)</i>
<b>Review of documents by GACA S&amp;R Team</b>	<input type="checkbox"/> <i>SATISFACTORY</i>	<input type="checkbox"/> <i>UNSATISFACTORY</i> <i>(Attach extra sheets as required)</i>
<b>Audit of Organization by GACA S&amp;R Team</b>	<input type="checkbox"/> <i>SATISFACTORY</i>	<input type="checkbox"/> <i>UNSATISFACTORY</i> <i>(Attach extra sheets as required)</i>

**Recommendation for SMS acceptance, by Manager Safety Program:**

*RECOMMENDED*  *NOT RECOMMENDED*

*Name:* *Signature:* *Date:*

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