

(Information to be filled by Applicant/Aerodrome Operator)

	As on (Date	):	
Aerodrome Name:		Aerodrome Operator:	
Aerodrome Reference Code:		Date of Inspection/Report:	

#### **General Instructions**

- 1. This list of regulations non-compliances, if any, must be submitted by the applicant in this form. The rows of the form given in each subhead may be expended/added as per requirements.
- 2. Wherever, non-compliances are identified in variation with GACAR 139 regulations for Aerodromes, the same must be provided in this form under associated subheads.
- 3. Based on the list of the GACAR's non-compliance, the applicant must carry out the risk assessment for each non-compliance and, if applicable, mitigation measures and corrective action plan (CAP) must be submitted in this form along with the application.
- 4. For any clarification, the Manager (Aerodrome Standards Department) of General Authority of Civil Aviation, Kingdom of Saudi Arabia, may be contacted.



(Information to be filled by Applicant/Aerodrome Operator)

### SUBPART A – CERTIFICATION AND AUTHORIZATION

S. No.		NON-COMPLIANCES,	RISK ASSESSMENT AND	CORRECTIVE ACTION TO BE SUBMITTE	D BY AERODROME OPERA	ATOR		REMARKS/ SUBMITTALS		
NO.	GACAR	DESCRIPTION OF	INITIAL RISK	(1). MITIGATION MEASURES	RESIDUAL RISK	START DATE	COMPLETION	SOBIVITIALS		
	REFERENCE									
		(Ref GACAR 5) (CAP) (Ref GACAR 5)								
1.										
2.										
3.										

### SUBPART B – CERTIFICATION OF AERODROMES

S. No.		NON-COMPLIANCES,	RISK ASSESSMENT AND	CORRECTIVE ACTION TO BE SUBMITTE	ED BY AERODROME OPERA	ATOR		REMARKS/ SUBMITTALS		
NO.	GACAR	DESCRIPTION OF	INITIAL RISK	(1). MITIGATION MEASURES	RESIDUAL RISK	START DATE	COMPLETION	SUBIVILIALS		
	REFERENCE									
		(Ref GACAR 5) (CAP) (Ref GACAR 5)								
1.										
2.										
3.										

### SUBPART C-AUTHORIZATION OF AERODROMES

S.		NON-COMPLIANCES,	RISK ASSESSMENT AND	CORRECTIVE ACTION TO BE SUBMITTE	D BY AERODROME OPERA	ATOR		REMARKS/
No.	GACAR	DESCRIPTION OF	INITIAL RISK	(1). MITIGATION MEASURES	RESIDUAL RISK	START DATE	COMPLETION	SUBMITTALS
	REFERENCE	NON-COMPLIANCES	ASSESSMENT	(2). CORRECTIVE ACTION PLAN	ASSESSMENT	(CAP)	DATE (CAP)	
			(Ref GACAR 5)	(CAP)	(Ref GACAR 5)			
1.								
2.								
3.								



(Information to be filled by Applicant/Aerodrome Operator)

# SUBPART D – DESIGN AND ESTABLISHMENT OF AERODROMES

S.		NON-COMPLIANCES,	RISK ASSESSMENT AND	CORRECTIVE ACTION TO BE SUBMITTE	D BY AERODROME OPERA	ATOR		REMARKS/ SUBMITTALS
No.	GACAR REFERENCE	DESCRIPTION OF NON-COMPLIANCES	INITIAL RISK	(1). MITIGATION MEASURES (2). CORRECTIVE ACTION PLAN	RESIDUAL RISK	START DATE	COMPLETION	SUBIVILITALS
	REFERENCE	NON-COMPLIANCES	ASSESSMENT (Ref GACAR 5)	(CAP)	ASSESSMENT (Ref GACAR 5)	(CAP)	DATE (CAP)	
1.								
2.								
3.								

### SUBPART E – AERODROME DATA

S.		NON-COMPLIANCES,	RISK ASSESSMENT AND	CORRECTIVE ACTION TO BE SUBMITTE	D BY AERODROME OPERA	ATOR		REMARKS/
No.	GACAR REFERENCE	DESCRIPTION OF NON-COMPLIANCES	INITIAL RISK ASSESSMENT (Ref GACAR 5)	(1). MITIGATION MEASURES (2). CORRECTIVE ACTION PLAN (CAP)	RESIDUAL RISK ASSESSMENT (Ref GACAR 5)	START DATE (CAP)	COMPLETION DATE (CAP)	SUBMITTALS
1.								
2.								
3.								

### SUBPART F - PHYSICAL CHARACTERISTICS

S. No.		NON-COMPLIANCES,	RISK ASSESSMENT AND	CORRECTIVE ACTION TO BE SUBMITTE	D BY AERODROME OPERA	ATOR		REMARKS/ SUBMITTALS
NO.	GACAR REFERENCE	DESCRIPTION OF NON-COMPLIANCES	INITIAL RISK ASSESSMENT (Ref GACAR 5)	(1). MITIGATION MEASURES (2). CORRECTIVE ACTION PLAN (CAP)	RESIDUAL RISK ASSESSMENT (Ref GACAR 5)	START DATE (CAP)	COMPLETION DATE (CAP)	SUDIVITIALS
1.								
2.								
3.								



(Information to be filled by Applicant/Aerodrome Operator)

# SUBPART G - OBSTACLE RESTRICTION AND REMOVAL

S.		NON-COMPLIANCES,	RISK ASSESSMENT AND	CORRECTIVE ACTION TO BE SUBMITTE	ED BY AERODROME OPERA	ATOR		REMARKS/
No.	GACAR	DESCRIPTION OF	INITIAL RISK	(1). MITIGATION MEASURES	RESIDUAL RISK	START DATE	COMPLETION	SUBMITTALS
	REFERENCE	NON-COMPLIANCES	ASSESSMENT	(2). CORRECTIVE ACTION PLAN	ASSESSMENT	(CAP)	DATE (CAP)	
			(Ref GACAR 5)	(CAP)	(Ref GACAR 5)			
1.								
2.								
3.								

#### SUBPART H – VISUAL AIDS FOR NAVIGATION

S.		NON-COMPLIANCES, RISK ASSESSMENT AND CORRECTIVE ACTION TO BE SUBMITTED BY AERODROME OPERATOR								
No.	GACAR REFERENCE	DESCRIPTION OF NON-COMPLIANCES	INITIAL RISK ASSESSMENT	(1). MITIGATION MEASURES (2). CORRECTIVE ACTION PLAN	RESIDUAL RISK ASSESSMENT	START DATE (CAP)	COMPLETION DATE (CAP)	SUBMITTALS		
			(Ref GACAR 5)	(CAP)	(Ref GACAR 5)					
1.										
2.										
3.										

### SUBPART I – VISUAL AIDS FOR DENOTING OBSTACLES

S.		NON-COMPLIANCES,	RISK ASSESSMENT AND	CORRECTIVE ACTION TO BE SUBMITTE	D BY AERODROME OPERA	ATOR		REMARKS/		
No.	GACAR	DESCRIPTION OF	INITIAL RISK	(1). MITIGATION MEASURES	RESIDUAL RISK	START DATE	COMPLETION	SUBMITTALS		
	REFERENCE									
			(Ref GACAR 5)	(CAP)	(Ref GACAR 5)					
1.										
2.										
3.										



(Information to be filled by Applicant/Aerodrome Operator)

#### SUBPART J – VISUAL AIDS FOR DENOTING RESTRICTED USE AREA

S.		NON-COMPLIANCES,	RISK ASSESSMENT AND	CORRECTIVE ACTION TO BE SUBMITTE	ED BY AERODROME OPERA	ATOR		REMARKS/
No.	GACAR	DESCRIPTION OF	INITIAL RISK	(1). MITIGATION MEASURES	RESIDUAL RISK	START DATE	COMPLETION	SUBMITTALS
	REFERENCE	NON-COMPLIANCES	ASSESSMENT	(2). CORRECTIVE ACTION PLAN	ASSESSMENT	(CAP)	DATE (CAP)	
			(Ref GACAR 5)	(CAP)	(Ref GACAR 5)			
1.								
2.								
3.								

### SUBPART K – ELECTRICAL SYSTEMS

S.		NON-COMPLIANCES,	RISK ASSESSMENT AND	CORRECTIVE ACTION TO BE SUBMITTE	D BY AERODROME OPERA	ATOR		REMARKS/
No.	GACAR REFERENCE	DESCRIPTION OF NON-COMPLIANCES	INITIAL RISK ASSESSMENT (Ref GACAR 5)	(1). MITIGATION MEASURES (2). CORRECTIVE ACTION PLAN	RESIDUAL RISK ASSESSMENT (Ref GACAR 5)	START DATE (CAP)	COMPLETION DATE (CAP)	SUBMITTALS
1.			(REI GACAR 5)	(CAP)	(REI GACAR 5)			
2.								
3.								

# SUBPART L – AERODROME OPERATIONAL SERVICES, EQUIPMENT AND INSTALLATIONS

S.	NON-COMPLIANCES, RISK ASSESSMENT AND CORRECTIVE ACTION TO BE SUBMITTED BY AERODROME OPERATOR						REMARKS/	
No.	GACAR	DESCRIPTION OF	INITIAL RISK	(1). MITIGATION MEASURES	RESIDUAL RISK	START DATE	COMPLETION	SUBMITTALS
	REFERENCE	NON-COMPLIANCES	ASSESSMENT	(2). CORRECTIVE ACTION PLAN	ASSESSMENT	(CAP)	DATE (CAP)	
			(Ref GACAR 5)	(CAP)	(Ref GACAR 5)			
1.								
2.								
3.								



(Information to be filled by Applicant/Aerodrome Operator)

### SUBPART M – AERODROME MAINTENANCE

S.	NON-COMPLIANCES, RISK ASSESSMENT AND CORRECTIVE ACTION TO BE SUBMITTED BY AERODROME OPERATOR					REMARKS/ SUBMITTALS		
No.	GACAR REFERENCE	DESCRIPTION OF NON-COMPLIANCES	INITIAL RISK	(1). MITIGATION MEASURES (2). CORRECTIVE ACTION PLAN	RESIDUAL RISK	START DATE	COMPLETION	SUBIVILITALS
	REFERENCE	NON-COMPLIANCES	ASSESSMENT (Ref GACAR 5)	(CAP)	ASSESSMENT (Ref GACAR 5)	(CAP)	DATE (CAP)	
1.								
2.								
3.								

# APPENDIX A TO M (AS APPLICABLE)

S.	NON-COMPLIANCES, RISK ASSESSMENT AND CORRECTIVE ACTION TO BE SUBMITTED BY AERODROME OPERATOR						REMARKS/	
No.	GACAR REFERENCE	DESCRIPTION OF NON-COMPLIANCES	INITIAL RISK ASSESSMENT (Ref GACAR 5)	(1). MITIGATION MEASURES (2). CORRECTIVE ACTION PLAN (CAP)	RESIDUAL RISK ASSESSMENT (Ref GACAR 5)	START DATE (CAP)	COMPLETION DATE (CAP)	SUBMITTALS
1.								
2.								
3.								

1. We hereby certify that the forgoing information is correct in every respect and no relevant information has been withheld. We fully understand that the submission of this list of non-compliance does not exonerate the aerodrome operator of responsibility for compliance of GACA regulations and it's only the information to assess the implication on safety due such non compliances during the aerodrome inspections for certification and authorization purposes only.
()
Signature of Accountable Executive
Name:
Place and Date:
****