

## Information and Advisory Notice No. 26

Issue No: ~~1~~—2\_\_\_ Dated: 27 June 2023

### **Change in Part-145 Aircraft Maintenance Organisation Regulations (Safety Management)**

#### **Introduction**

[Regulation \(EU\) 2021/1963](#) amending [Regulation \(EU\) No 1321/2014](#) introduces the Management System in the Aircraft Maintenance domain, as of 2<sup>nd</sup> December 2022.

EASA has issued [ED Decision 2022/011/R - Amendment of the AMC & GM to Commission Regulation \(EU\) No 1321/2014 | SMS in Part-145 and Occurrence reporting | EASA \(europa.eu\)](#) of 10 May 2022 introducing Amendment 5 to Issue 2 of the Acceptable Means of Compliance and Guidance Material to Annex II (Part-145) to Commission Regulation (EU) No 1321/2014.

The scope of this IAN is not to substitute the AMC issued by EASA, but it is intended to supplement the AMCs, summarize and bring to the attention the most important issues, changes and additions which have an impact on Part-145 applicants and approved organisations.

**As per Article 1 of Reg (EU) 2021/1963 amending Article 4 of Reg (EU) 1321/2014 the full compliance with the Part-145 requirements applicable on 2 December 2022 shall be implemented by 2 December 2024.**

This means that a transition period of 2 years may be observed.

#### **SECTION A – REGULATION AND AMC**

The new Part-145 applicable headings for an aircraft maintenance organisation are the following:

#### **SECTION A —TECHNICAL AND ORGANISATION REQUIREMENTS**

- 145.A.10 Scope
- 145.A.15 Application or an organisation certificate
- 145.A.20 Terms of approval and scope of work
- 145.A.25 Facility requirements
- 145.A.30 Personnel requirements
- 145.A.35 Certifying staff and support staff
- 145.A.37 Airworthiness review staff
- 145.A.40 Equipment, and tools
- 145.A.42 Components
- 145.A.45 Maintenance Data
- 145.A.47 Production Planning

- 145.A.48 Performance of maintenance
- 145.A.50 Certification of Maintenance
- 145.A.55 Record-keeping
- 145.A.60 Occurrence Reporting
- 145.A.65 Maintenance procedures
- 145.A.70 Maintenance Organisation Exposition (MOE)
- 145.A.75 Privileges of the organisation
- 145.A.80 Limitations on the organisation
- 145.A.85 Changes to the organisation
- 145.A.95 Findings
- 145.A.120 Means of compliance
- 145.A.140 Access
- 145.A.155 Immediate reaction to a safety problem
- 145.A.200 Management system
- 145.A.202 Internal safety reporting scheme
- 145.A.205 Contracting and subcontracting

## Definitions:

### GM1 to Annex II (Part-145) Definitions

**Audit** refers to a systematic, independent, and documented process for obtaining evidence, and evaluating it objectively to determine the extent to which requirements are complied with. Note: Audits may include inspections.

**Assessment** in the context of management system performance monitoring, continuous improvement and oversight, refers to a planned and documented activity performed by competent personnel to evaluate and analyse the achieved level of performance and maturity in relation to the organisation's policy and objectives. Note: An assessment focuses on desirable outcomes and the overall performance, looking at the organisation as a whole. The main objective of the assessment is to identify the strengths and weaknesses to drive continual improvement.

**Base maintenance** Ref. AMC1 145.A.10

**Competency** is a combination of individual skills, practical and theoretical knowledge, attitude, training, and experience.

**Correction** is the action to eliminate a detected non-compliance.

**Corrective action** is the action to eliminate or mitigate the root cause(s) and prevent the recurrence of an existing detected non-compliance, or other undesirable conditions or situations. Proper determination of the root cause(s) is crucial for defining effective corrective actions to prevent reoccurrence.

**Error** is an action or inaction by a person that may lead to deviations from accepted procedures or regulations.

Note: Errors are often associated with occasions when a planned sequence of mental or physical activities either fails to achieve its intended outcome, or is not appropriate with regard to the intended outcome, and when results cannot be attributed purely to chance.

**Fatigue** is a physiological state of reduced mental or physical performance capability resulting from sleep loss or extended wakefulness, circadian phase, or workload (mental and/or physical activity) that can impair a person's alertness and ability to safely perform his or her tasks.

**Hazard** is a condition or an object with the potential to cause or contribute to an aircraft incident or accident.

**Human factors** is anything that affects human performance, which means principles that apply to aeronautical activities, and which seek safe interface between the human and other system components by proper consideration of human performance.

**Human performance** refers to human capabilities and limitations which have an impact on the safety and efficiency of aeronautical activities. Inspection in the context of compliance monitoring and oversight, refers to an independent documented conformity evaluation by observation and judgement accompanied, as appropriate, by measurement, testing or gauging, in order to verify compliance with applicable requirements. Note: Inspection may be part of an audit (e.g. product audit), but may also be conducted outside of the normal audit plan; for example, to verify closure of a particular finding.

**Just culture** Ref. Regulation (EU) No 376/2014, Article 2.

**Line maintenance** Ref. AMC1 145.A.10

**Near miss** is an event in which an occurrence to be mandatorily reported according to Regulation (EU) No 376/2014 was narrowly averted or avoided. Example: A mechanic on rechecking his or her work at the end of a task realises that one work card step was not properly carried out.

**Preventive action** is the action to eliminate the cause of a potential non-compliance or other undesirable potential situations.

**Risk assessment** is an evaluation based on engineering and operational judgement and/or analysis methods in order to establish whether the achieved or perceived risk is acceptable or tolerable

**Safety culture** is an enduring set of values, norms, attitudes, and practices within an organisation concerned with minimising the exposure of the workforce and the general public to dangerous or hazardous conditions. In a positive safety culture, a shared concern for, commitment to, and accountability for safety is promoted.

**Safety risk** refers to the predicted probability and severity of the consequences or outcomes of a hazard.

**Safety training** refers to dedicated training to support safety management policies and processes, including human factors training. Note: The main purpose of the safety training programme is to ensure that personnel at all levels of the organisation maintain their competency to fulfil their roles safely. Safety training should, in particular, consider the safety knowledge derived from hazard identification and risk management processes, and support the fostering of a positive safety culture. Note: Safety management training refers to specific training for the staff involved in safety management.

## **Part-145.A.15 Terms of Approval and Scope of Work**

The intent of the internal pre-audit referred to in point 145.A.15(b)(1) is to ensure that the organisation has internally verified its compliance with the Regulation.

## **Part-145.A.30 Personnel requirements**

The Accountable Manager shall nominate persons or group of persons responsible to manage the organization.

The level of the KNOWLEDGE, BACKGROUND AND EXPERIENCE OF NOMINATED PERSON(S) shall be pursuant to the level stated in **AMC1 145.A.30(cc) Personnel requirements**

The functions of the Safety Manager should be those defined in **AMC1 145.A.30(c);(ca)**.

The organization shall conduct a competency assessment of the nominated person based on the requirements of Part-145.A.30 (e), skills and aptitude of the nominee, the complexity, size and nature of operation of the organisation. This assessment shall be sent to TM CAD with the application.

**GM2 145.A.30(e) Personnel requirements COMPETENCY ASSESSMENT ELEMENTS for the Safety Manager** in addition to the other staff.

### **GM4 145.A.30(e) also covers training of compliance monitoring personnel:**

Those responsible for managing the compliance monitoring function should receive training on this task. Such training should cover the requirements of compliance monitoring, manuals and procedures related to the task, audit techniques, reporting, and recording.

Nominated persons would be accepted by TM CAD following an assessment process of the nomination of the person.

The nominated persons and Compliance Manager within a Part 145 AMO need to assign a portion of their available time to the implementation and documentation of the safety management system. In large and medium sized organisations they will also be required to be part of the Safety Review Board.

In the case of small organisations, the Safety Review Board and Safety Action Group may be deemed not required.

**GM1 145.A.30(e) Personnel requirements** contains a training syllabus for initial safety training

This training comprises the classic HF Training syllabus with the addition of the following:

- 1a. Safety risk management
  - 1a.1. Hazard identification
  - 1a.2. Safety risk assessment
  - 1a.3. Risk mitigation and management
  - 1a.4. Effectiveness of safety risk management

## 2. Safety Culture/Organisational factors

### 2.1 Justness/trust

### 2.2 Commitment to safety

### 2.3 Adaptability

### 2.4 Awareness

### 2.5 Behaviour

### 2.6 Information

## 10. Organisation's HF safety programme

### 10.1. Safety policy and objectives, just culture principles

#### 10.2.1. Reporting errors and hazards, internal safety reporting scheme

### 10.2. Disciplinary policy

### 10.3. Error investigation process

### 10.4. Action to address problems

### 10.5. Feedback and safety promotion

## **Part-145.A.35**

**AMC1 145.A.35(d) Certifying staff and support staff** refers also to hazard and related safety risk identification coverage during recurrent (continuation) training.

## **Part-145.A.37 Airworthiness review staff**

**AMC1 145.A.37 Airworthiness review staff** provide means of compliance of the qualification criteria of ARS in terms of experience, formal aeronautical training, qualifications and recency.

## **Part-145.A.47**

**AMC1 145.A.47(b) and GM1 145.A.47(b) Production planning** cover the CONSIDERATION OF FATIGUE IN THE PLANNING OF MAINTENANCE.

Implementation of Fatigue Risk Management systems can be successfully achieved through:

- Policies and procedure
- Responsibilities and Reporting
- Training (HF/safety training)
- Checking, Assessment and Control
- Evaluation/Investigation of Reports

## **Part-145.A.85 Changes to the organisation**

**MANAGEMENT OF CHANGES** The organisation should manage changes to the organisation in accordance with point (e) of AMC1 145.A.200(a)(3). For changes requiring prior approval, it should conduct a risk assessment and provide it to the competent authority upon request.

Management of change is a process established by the organisation to identify external and internal changes that may have an adverse effect on the safety of its maintenance activities

Changes that affect the scope of approval, changes in the AM or the nominated personnel and the line of reporting to the AM, the operational address/es, changes to the procedure as regards changes not requiring prior approval shall be formalized with an application for approval change by submitting an [EASA Form 2](#) and any documentation relevant to the change in the approval as directed by TM CAD.

In the case of changes to the nominated persons, these persons would have to be nominated by the AM **with a formal letter together with the CV with relevant qualifications, experience and attestations and the amended MOE.**

The application for the amendment of an organisation certificate should be submitted at least 30 working days before the date of the intended changes.

In the case of a planned change of a nominated person, the organisation should inform the competent authority at least 20 working days before the date of the proposed change.

Unforeseen changes should be notified at the earliest opportunity, in order to enable the competent authority to determine whether there is continued compliance with the applicable requirements, and to amend, if necessary, the organisation certificate and related terms of approval.

**The organisation should manage the safety risks related to any changes to the organisation in accordance with AMC1 . For changes requiring prior approval, it should conduct a risk assessment and submit it to TM CAD.**

## **Part-145.A.60 Occurrence reporting**

Where the organisation holds one or more additional organisation certificates within the scope of Regulation (EU) 2018/1139 and its delegated and implementing acts: (1) the organisation may establish an integrated occurrence reporting system covering all certificate(s) held;

AMC 145.A.60 makes reference to the requirements defined in **Regulation (EU) No 376/2014** on the reporting, analysis and follow-up of occurrences in civil aviation.

For organisations having their principal place of business in a Member State, Regulation (EU) 2015/1018 lays down a list classifying occurrences in civil aviation to be mandatorily reported.

[AMC 20-8A](#) provides further information on reportable occurrences.

**Occurrence reports shall be made using the CENTRIK Occurrence reporting platform used by TM CAD. For further information on the use of this platform please refer to the dedicated webpage in the TM CAD website**

<https://www.transport.gov.mt/aviation/safety-management/occurrence-reporting-3287>

## **Part-145.A.70 Maintenance Organisation Exposition (MOE)**

**AMC1 145.A.70(a)** provides an outline of the layout of an acceptable MOE containing the required parts and headings.

The MOE shall have the same structure and with the headings given by AMC, however additional heading(s) may be added when the organization wishes to add any special procedure related to its operation.

## **Part-145.A.75 (b) Contracting and subcontracting**

Subcontractors shall be pre-audited and inserted in the Compliance monitoring audit plan. The Part-145 shall have a control procedure of subcontractors including a revocation process for subcontractors that do not meet the Part-145 maintenance organization.

## **Part-145.A.95 Findings**

### **Closure of Findings by the Organisation**

The findings closure process shall be performed in a systematic manner following defined steps pursuant to the regulation and quality management standards.

## Corrective Action

Following the formal communication of the finding by the inspector, the audited organisation shall initiate the process by assigning the persons/group of persons responsible for each finding in order to:

1. Implement the **correction**, i.e the Immediate action to correct/contain the defect, mistake, omission or non-conformity especially in the case of a one-off occurrence, and
2. Define and implement the **corrective action** to eliminate the cause of a Finding and to prevent recurrence.

Corrective action for closure of finding can be divided in four stages:

- **Root cause analysis (RCA)**
- **Corrective action plan (CAP)**
- **Implementation of CAP (curative and preventive remedial action)**
- **Ex-post evaluation and verification of effectiveness of corrective action.**

In terms of compliance with the regulation the first three stages of the management of findings/non-conformities is the normal process for closure of a finding.

However ex-post this evaluation or verification, both internally and externally, could be in the form of a follow-up audit/ inspection.

### Root Cause Analysis

Root cause analysis is performed to identify the root cause of a finding especially when this is a systemic finding. This analysis can be performed using the **5 Whys** technique or any other suitable techniques such as Ishikawa/Fishbone etc. to determine possible contributing factors for lack of compliance with the requirements. This step shall be recorded by the organisation and presented to TM CAD upon request.

Possible Contributing factors for root cause of findings:

- i. Policies
- ii. Lack of Procedures
- iii. Lack of Knowledge
- iv. Lack of Experience
- v. Lack of Communication
- vi. Training
- vii. Facilities
- viii. Documentation Control
- ix. Environmental Conditions
- x. Competency Issues
- xi. Software Issues
- xii. Procedures not being followed
- xiii. Human Factors (Dirty Dozen)



- xiv. Omission
- xv. Violation
- xvi. One-off failure
- xvii. Quality Control
- xviii. Compliance Monitoring

The RCA will determine the extent of the CAP.

### **Corrective Action Plan**

The **corrective action plan** enables the auditee and auditor to understand and determine the remedial action and measures necessary to close the finding and be in compliance, with a proposal (plan).

### **Implementation of CAP**

The Remedial action is the implementation of the CAP by the auditee. Once the CAP is accepted by TM CAD, the auditee shall send the evidence of the corrective actions and any documents which require to be sent for review or approval within the acceptable timescales. In certain circumstances the Inspector may opt to verify closure in-situ.

Immediate **curative** corrective action to rectify the defect, mistake, omission or non-conformity especially in the case of a one-off occurrence, and

Long term **preventive** corrective action aimed at eliminating weaknesses in the system, preventing reoccurrence or at least mitigating the probability of reoccurrence through improved procedures, planning, training and checking.

It is recognised that some findings during the audits may be of a one-off nature on account of omissions or mistakes or other human factors issues during the performance of work. This means that the finding is not a systemic issue and may not require preventive corrective actions.

### **Ex-Post Evaluation and verification**

The ex-post evaluation of corrective actions is performance based, enforcing continued compliance and continuous improvement.

Internal and external verification and evaluation of the effectiveness of the preventive corrective actions and measures, both from the Compliance Monitoring personnel and Airworthiness Inspector, could also be in the form of a **follow-up audit, inspection** or meeting.

### **Extension of Period of re-compliance**

In case where the audited organisation cannot ensure re-compliance with the regulations in the prescribed timescales, the organisation may ask for extension of the deadline for re-compliance. This shall be done in writing, duly providing justification for extension request, at least two weeks before the agreed deadline. The Airworthiness Inspector may issue the extension, once the Corrective Action Plan for closure of the finding has been accepted by TM CAD.

The extension of deadline of re-compliance shall be communicated by the Airworthiness Inspector to the applicable postholder/s or auditee. The extension shall be at the discretion of the inspector taking into consideration safety, technical and logistical implications of such extensions.

Both internal and external findings may identify risks and can be an indicator for Safety performance monitoring.

## Observations

The AI may issue observations for any of the following cases not requiring level 1 or level 2 findings:

- (1) for any item whose performance has been assessed to be ineffective;
- (2) when it has been identified that an item has the potential to cause a non-compliance
- (3) when suggestions or improvements are of interest for the overall safety performance of the organisation.

The observations issued under this point shall be communicated via CENTRIK to the organisation.

For each observation notified by the AI, the organisation should analyse the related issues and determine when actions are needed.

The handling of the observations should follow a process similar to the handling of the findings by the organisation.

The organisation should record the analysis and the outputs, such as the actions taken or the reasons for not taking actions.

## Part-145.A.120 Alternative Means of Compliance

### AltMoC

**AMC1 145.A.120(b) Means of compliance** describes how an AltMoC shall be established as part of the Management System procedures. AltMoC are presented to TM CAD for review and acceptance and finally cleared by EASA.

### 145.A.155 Immediate reaction to a safety problem

Upon the identification of a safety problem following either:

- results from routine scheduled or spot inspections and audits; or
- the receipt of a voluntary or occurrence report; or
- any safety-significant information issued by TM CAD or EASA, in the form of airworthiness or operational directives

The Part-145 shall react in a structured and timely manner to mitigate or eliminate the safety risks.

## Part-145.A.200 Management system

The Safety Management aspects introduced are the following:

- new concepts and policy (e.g. just culture, safety policy and objectives);
- new terminology (e.g. 'compliance monitoring' instead of 'quality system', 'safety training' instead of 'HF training');
- new organisation processes (e.g. internal safety reporting scheme, risk assessment);
- new roles and functions (e.g. safety manager);
- addressing specific threats (e.g. fatigue)

**GM1 145.A.200 Management system** provides general guidance on the establishment of the Safety Management System

Safety Management system is based on four pillars:

1. **Safety Policy** - identification of safety objectives and implementation of policy through documented procedures and improvement.
2. **Occurrence reporting** - internal reporting and occurrence reporting scheme.
3. **Safety Promotion** - Includes training, communication, and other actions to create a positive safety culture within all levels of the workforce
4. **Safety Risk Management** – Hazard identification, risk assessment and mitigation.

The approach of the Part-145 requirements is that the 'Management System' comprises also Compliance Monitoring. 'Compliance Monitoring' terminology is a replacement of the 'quality system' in Part-145.A.65

## **Compliance Monitoring**

### **AMC1 145.A.200(a)(6) Management system COMPLIANCE MONITORING — GENERAL**

**(a) The primary objectives of compliance monitoring are to provide an independent monitoring function on how the organisation ensures compliance with the applicable requirements, policies and procedures, and to request action where non-compliances are identified.**

**(b) The independence of the compliance monitoring should be established by always ensuring that audits and inspections are carried out by personnel who are not responsible for the functions, procedures or products that are audited or inspected.**

**GM1 145.A.200(a)(6)** Management system provides technical guidance on the use of remote information and communication technologies (ICT) to support regulated organisations when conducting internal audits/monitoring compliance of their organisation with the relevant requirements, and when evaluating vendors, suppliers and subcontractors.

### **Part-145.A.200 (c) states:**

*(c) Where the organisation holds one or more additional organisation certificates within the scope of Regulation (EU) 2018/1139 and its delegated and implementing acts, the management system may be integrated with that required under the additional certificate(s) held.*

This means that the Management System of Part-145 AMO which forms part of an organization holding various approvals such as an AOC/CAMO should be integrated. This integration entails that various units within the AOC holder and TM CAD working together and adopting a more inclusive approach to comply with the requirements and to cover all the aspects of safety management within all the domains of an operation.

## **AMC1 145.A.200(a)(3) Management system**

### **PART 3 MANAGEMENT SYSTEM PROCEDURES**

- 3.1 Hazard identification and safety risk management schemes
- 3.2 Internal safety reporting and investigations
- 3.3 Safety action planning
- 3.4 Safety performance monitoring
- 3.5 Change management
- 3.6 Safety training (including human factors) and promotion
- 3.7 Immediate safety action and coordination with the operator's emergency response plan (ERP)
- 3.8 Compliance monitoring
  - 3.8.1 Audit plan and audit procedures
  - 3.8.2 Product audit and inspections
  - 3.8.3 Audit findings — corrective action procedure
- 3.9 Certifying staff and support staff qualifications, authorisation and training procedures
- 3.10 Certifying staff and support staff records
- 3.11 Airworthiness review staff qualification, authorisation and records
- 3.12 Compliance monitoring and safety management personnel
- 3.13 Independent inspection staff qualification
- 3.14 Mechanics qualification and records
- 3.15 Process for exemption from aircraft/aircraft component maintenance tasks
- 3.16 Concession control for deviations from the organisations's procedures
- 3.17 Qualification procedure for specialised activities such as NDT, welding, etc.
- 3.18 Management of Control of manufacturers' and other maintenance external working teams
- 3.13 Human factors training procedure
- 3.19 Competency assessment of personnel
- 3.20 Training procedures for on-the-job training as per Section 6 of Appendix III to Part-66 (limited to the case where the competent authority for the Part-145 approval and for the Part-66 licence is the same).
- 3.21 Procedure for the issue of a recommendation to the competent authority for the issue of a Part-66 licence in accordance with point 66.B.105 (limited to the case where the competent authority for the Part-145 approval and for the Part-66 licence is the same).
- 3.22 Management system record-keeping

In case this section is integrated in the Safety Manual / Management System Manual, the MOE has to make clear reference to it for traceability and proper review and management of the procedures. Such manuals shall be also sent for review together with the MOE.

It is recognized that one size does not fit all and customization of the management system and its procedures in terms of the organisation size, complexity and working environment to enable a management system which is sustainable and effective.

**AMC1 145.A.200(a)(3) lists the SAFETY MANAGEMENT KEY PROCESSES:**

- a) Hazard identification processes
- b) Risk management processes
- c) Internal investigation
- d) Safety performance monitoring and measurement
- e) Management of change
- f) Continuous improvement
- g) Immediate safety action and coordination with the operator's Emergency Response Plan (ERP)

**HAZARD IDENTIFICATION**

The hazards identification should include in particular:

- (i) hazards that may be linked to human factors issues that affect human performance; and
- (ii) hazards that may stem from the organisational set-up or the existence of complex operational and maintenance arrangements (such as when multiple organisations are contracted, or when multiple levels of contracting/subcontracting are included)

As the AMC states the organization may opt for the management system procedures to be incorporated into the Safety Manual / Management System Manual. This means that the Part 3 of the MOE would have to be integrated in the Safety Manual / Management System Manual.

The following are the new MOE headings in Part 3 related to the Management system:

**Part-145.A.202 Internal safety reporting scheme**

The new Part-145 requirements requires the AMO to put in place its safety policy commitment to apply 'just culture' principles to internal safety reporting and the investigation of occurrences and, in particular, not to make available or use the information on occurrences:

- (i) to attribute blame or liability to front line staff or other persons for actions, omissions or decisions taken by them that are commensurate with their experience and training; or
- (ii) for any purpose other than the maintenance or improvement of aviation safety.

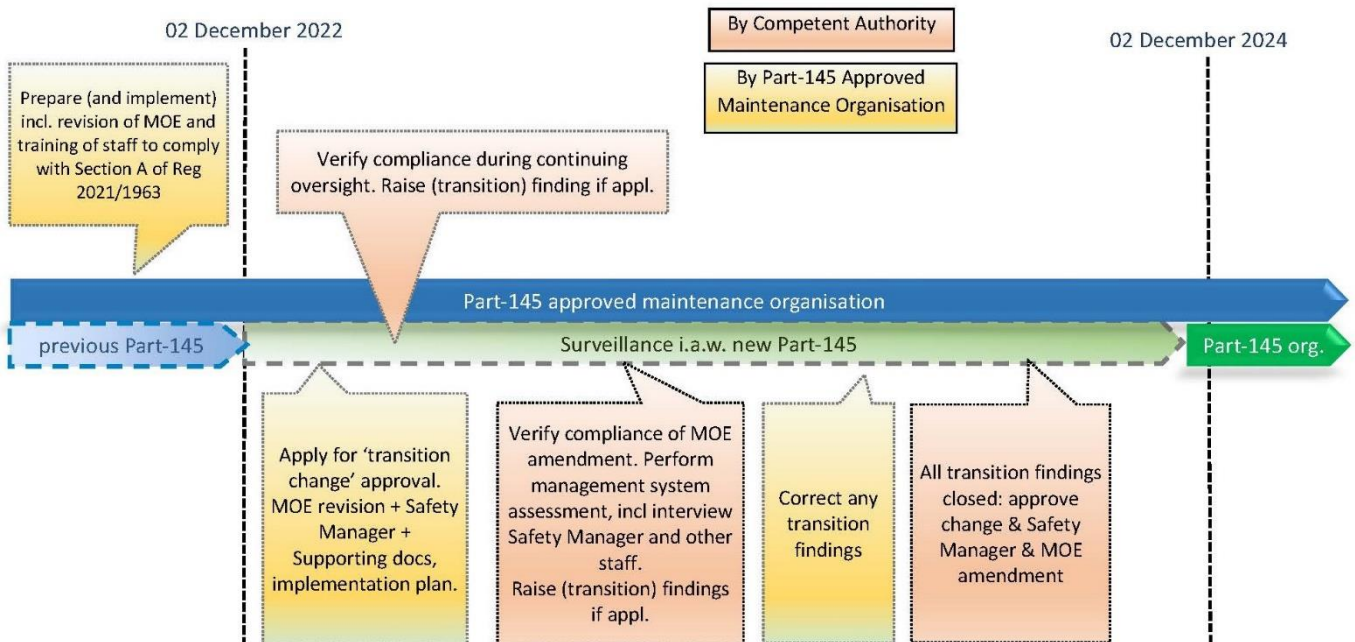
This commitment shall be reflected in its procedures to ensure free and frank reporting of any potentially safety-related occurrence, including incidents such as errors or near misses, safety issues and hazards are identified.

**AMC1 145.A.202** Internal safety reporting scheme provides the elements of an internal safety reporting scheme of an organization.

**GM1 145.A.202** illustrates the scope of the occurrence reporting scheme.

## SECTION B – Part-145 Management System Compliance Transition

### TRANSITION PERIOD (2 Dec 2022- 2 Dec 2024)



In case the Part-145 is not fully compliant by 2 December 2022, TM CAD would issue a generic or specific finding to the organization against the Part-145 headings which are not in compliance. Then it is the responsibility of the Part-145 organisation to ensure the finding/s issued are closed within the two year period.

The following are the steps to be taken in transition to full compliance with the new Part-145 requirements.

#### 1. ISSUE OF FINDING/S

TM CAD: Notifies to the applicant a **'generic transition finding' or specific findings**.

#### 2. IMPLEMENTATION PLAN

The organisation develops and submits an implementation plan that includes the following:

- Gap analysis between the existing organisation procedures and the new Part-145 requirements;
- A schedule for developing the new MOE (compliant with Part-145);
- Nomination of Safety Manager
- Establishment of Management System (Safety)
- Identification of Hazards of the organisation
- Safety Training of staff or at least presentation of training syllabus and a plan for training of staff on safety and MOE.
- Results of the pre-audit by the applicant organization.
- Safety Assessment of sub-contracted organisations

### **3. ACCEPTANCE OF IMPLEMENTATION PLAN**

TM CAD assess the implementation plan proposed by the organisation, and if the assessment concludes that it is sufficient to address the transition, accept this plan.

The current audit cycle may be continued, but the oversight programme should be reviewed to ensure that, before **2 June 2024**, TM CAD will have checked compliance of the organisation against the Part-145 requirements which are newly introduced in Part-145.

### **4. IMPLEMENTATION PLAN EXECUTION**

Organisation executes the implementation plan, including the acquisition of the necessary resource and the development of the MOE. It should be ensured that the staff receives difference training on the future approved MOE and associated procedures.

The drafting of the MOE should account for the transition findings raised by TM CAD during the oversight. But it should be avoided to submit successive exposition amendments for approval with the aim to close these transition findings individually. Once the MOE is considered fully compliant with Part-145, it shall be submitted to TM CAD for approval.

### **5. CONTINUED SAFETY OVERSIGHT**

TM CAD continues to perform the oversight of the organisation but in accordance with:

- All headings in Part-145;
- The implementation plan;
- The amended exposition.

### **6. FINAL APPROVAL OF MOE REVISION/S AND FINDING/S CLOSURE**

At this stage, TM CAD should have checked compliance of the organisation against every Part-145 new requirements and headings in the MOE.

The MOE approval signifies the formal acceptance of the nominated person for Safety.

The closure of the generic finding signifies full compliance with Part-145.

## SECTION C - INITIAL APPROVAL TO PART-145

Due to the approval process and documental phase all new applications from the date of this IAN shall be submitted to TM CAD in accordance with Part-145.

Application shall be made using [EASA Form 2](#)

The application package shall contain the following:

1. Company registration certificate;
2. A company board resolution nominating the Accountable Manager;
3. A letter from the Accountable Manager nominating the management team with:
  - a. CVs with relevant qualifications, experience and attestations of nominated persons
  - b. Initial Competency Assessment of Managerial Team showing compliance with Part-145.A.30 and its AMCs;
4. Maintenance Organisation exposition (MOE) in compliance with 145.A.70 and its AMCs
5. Capability List (if applicable)
6. NDT Written Practice (if applicable)
7. Results of the pre-audit by the applicant organization.
8. Compliance Monitoring Audit Plan

Note: functions related to compliance monitoring or safety management are combined subject to not resulting in any conflicts of interest;

Draft documents should be submitted at the earliest opportunity so that assessment of the application can begin. The initial certification or approval of changes cannot take place until TM CAD has received the completed documents.

Upon receiving an application for the initial issue of a certificate for an organisation, TM CAD shall verify the organisation's compliance with the applicable by:

- a) verify the organisation's documentation with the applicable requirements
- b) verify eligibility of Nominated post holders for the proposed position by reviewing the documents submitted. (point 3 above)
- c) once TM CAD is satisfied that the application and the supporting documentation, including the results of the pre-audit performed by the organisation, are in compliance with the applicable requirements TM CAD shall conduct an audit of the organisation, including interviews of the personnel, and inspections carried out at the organisation's facilities.
- d) a meeting with the accountable manager of the organisation shall be convened at least once during the investigation for initial certification to ensure that he/she fully understands the significance of the certification process and the reason for signing the statement of the organisation to comply with the procedures specified in the MOE.
- e) TM CAD shall confirm in writing all the findings raised during the verification to the organisation. For initial certification, all findings must be corrected to the satisfaction of TM CAD before the certificate can be issued.
- f) If an application for an organisation certificate is refused, the applicant should be informed of the right of appeal that exists under national law.



