

CHECKLIST FOR PHASE IV (INSPECTION PHASE) ACCEPTANCE

For Approval of Approved Training Organization in accordance with TCAR PEL Part ORA

<u>Instructions</u>

Please check the boxes for the items below, complete the required information in the blank fields, and ensure this checklist is signed by the PEL Manager, Head of TO, and Principal Inspector. In the Remarks box, specify any restrictions, constraints, limitations, or rationale, as applicable. For the filling methodology, refer to the CAAT-PEL-RDMSP Manual.

In case of termination or incompletion of Section 3, managerial personnel may provide a recommendation for further action in Section 4 of this checklist.

| 1. GENERAL | | | | | |
|--|--------------------------|------------------|---------|-----------------------|-------------|
| Name of ATO | | | | | |
| ATO's Point of Contact Name | | | Email | | |
| EMPIC Surveillance Activities No. | | XXXXX-XXXXX | | | |
| Inspection Date | | DD//MM/YYYY | Remarks | | |
| Audit Report No. | | XXXXX-XXXXX | | | |
| No | Position | Name – Last Name | | | Signature |
| 1. | PEL Manager | | | | |
| 2. | Head of TO | | | | |
| 3. | Principal Inspector (PI) | | | | |
| | | | | Phase Completion Date | DD//MM/YYYY |
| *The phase completion date is the date when the inspector has completed all items in accordance with Section 5, 5.1.5, 1 of the PEL Procedural Manual: Issuance of Approved Training | | | | | |

Organization (ATO) Certificate.

Effective Date: 4-Feb-2025



| 2. | PROCEDURES VERIFICATION | | | | |
|---------|--|--|-----------|--|--|
| Refer t | Refer to PEL Procedural Manual Section 5, 5.1.5, 1. ISSUANCE OF APPROVED TRAINING ORGANIZATION (ATO) CERTIFICATE | | | | |
| No. | Verification of Action Taken Cor | | Remark(s) | | |
| 1 | Send the self-evaluation checklist to applicant | | | | |
| 2 | Issue invoice for inspection fee (via FAD) | | | | |
| 3 | Send formal letter and audit notification | | | | |
| 4 | (If applicable) Perform on-site inspection | | | | |
| 5 | Issue Audit Report | | | | |
| 6 | (If any) Issue findings via EMPIC System | | | | |
| 7 | (If manual amendment is required) Grant Manual Revision Approval / Approval Letter | | | | |
| 8 | (If applicable) Send finding's closing action acceptance letter | | | | |
| 9 | Store documents in official system (DRMS) | | | | |
| 10 | Along with this Checklist, Draft and attach phase completion letter for Manager Approval | | | | |
| 11 | (If Applicable) Terminate applicant after 2 times finding rejection (Inform by email or letter) | | | | |
| | | | | | |

| 3. | DOCUMENTS VERIFICATION | | | | |
|--|--|---|---|-----|-----------|
| Refer to Record-Keeping and Document Management System Procedure, 2.4.1 and PEL Procedural Manual Section 5, 5.1.5, 1. | | | | | |
| No. | Documents Verified | S | U | N/A | Remark(s) |
| 1 | Audit Permission Letter | | | | |
| 2 | Audit Notification and Audit Schedule | | | | |
| 3 | Receipt of Audit Fee | | | | |
| 4 | Audit Checklist | | | | |
| 5 | Audit Report | | | | |
| 6 | Evidence of Closing All Noncompliance Findings | | | | |

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| 4. IN CASE OF TERMINATION OR INCOMPLETION OF SECTION 3 (IF APPLICABLE) | | | | | |
|--|--|--|--|--|--|
| Further Action Required | | | | | |
| Head of TO's Comment | | | | | |
| PEL Manager's Comment | | | | | |

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