



Surveillance Non-Conformity Form

General

	Organization:		ı	□ Approv	ed	□ Nor	n-approved / Initial
Use	Date of Activity:		ŗ	Fechnical	Domain:		
DGCA / ASD Use		☐ Audit (Serial No.) ((AU/Year/Div./xx	x) 🗆 Ins	spection
DGCA	Type of Activity:					□ Otl	ner:
	Inspector Name:						
	Auditee Name:						
		<u>Findi</u>	ing]	<u>Details</u>	<u>S</u>		
	Finding Serial No:						(NC/Year/Div./xxx)
	Finding Level:	□ Level 1		Level 2		evel 3	Observation Used for Initial approval only
	Repeated Findings:	□ yes □ No		ious findin n. & Finding Sn. as	Ü		
	SSP Category Code:						
	Finding Reference:	☐ Regulatory		rg. Appro	,,,,,	efrance:	:
DGCA / ASD Use	Finding Description:						
	Remarks:						
	Inspector:	Name:			Signature	•	Date:
Division Head:			Signature	•	Date:		





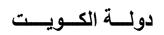


Fi	nding Serial No:			(NC/Year/Div./xxx)		
		Corrective Action Plan				
	Root Couse:					
se	Proposed Corrective Action:					
Organization's Use	Proposed Preventive Action:					
	Proposed					
	Closure Date: Submission:	Organization Name:	Head of Compliance Signature:	Date:		
	Notes: e.g. extension of original closure dates after acceptances					
		Nama	Signatures	Datas		
DGCA / ASD Use	Inspectors Acceptance	Name:	Signature:	Date:		
DGCA /	Division Head	Name:	Signature:	Date:		











Fi	nding Serial No:			(NC/Year/Div./xxx)			
		1		(Ive, I car, Elvi, Elli)			
Organization's Use		Closure Follow-up					
	Closure Statement:	I hear by declared that the non-conformity has been closed as par the proposed action plan provided and accepted by DGCA/ASD.					
	Evidence: (if applicable)						
	Declaration:	Organization Name:	Head of Compliance Signature:	Actual closure Date:			
			_				
DGCA / ASD Use	Inspectors Verification:	Name:	Signature:	Date:			
	Division Head:	Name:	Signature:	Date:			

End





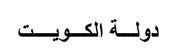
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_ :	Extra Detials of () as needed	
Finding Serial N	No:		(NC/Year/Div./xxx)









DGCA Form 1010 – Completion Guide

(aligned with CAP 108 Surveillance Policy, Issue 2 Rev 0)

1 Purpose of Form 1010

Form 1010 is the **sole DGCA-approved template** for recording, tracking and closing every surveillance non-conformity raised by Aviation Safety Department (ASD) inspectors. Its use is mandated in CAP 108 - "Non-conformity Reporting Form".

2 Who fills which parts

Section	Completed by	Timing & Key Rules	
Header / General and Finding Details Inspector		Fill on-site. Assign a serial number (NC/Year/Division/###) and select the finding level (1, 2 or 3) as defined in CAP 108.	
Action Plan	Certificate-holder (Head of Compliance) Submit within the policy deadline (≤ 72 h for 20 days for Level 2; ≤ 45 days for Level 3).		
Division-Head Acceptance	Hechnical	Accept or request revision as per division accepter timeframe.	
	Certificate-holder	Organisation declares closure; inspector verifies evidence and records actual closure date (target \leq "Upon verification" for Level 1, \leq 90 days Level 2, \leq 120 days Level 3).	

3 Field-by-field instructions

#	Field on the form	How to complete	Policy reference
A	Organization / Date of Activity / Technical Domain / Type of Activity	Select domain (SMS, OPS, AW, LIC, ANS, ACS, DGR). Indicate "Audit", "Inspection", "Spot Check" or "Other".	CAP 108 7.Technical Divisions Codes



State of Kuwait



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#	Field on the form	How to complete	Policy reference
В	Finding Serial No.	NC/Year/Division/### (e.g. NC/2025/OPS/002). Number sequentially per division for each calendar year.	CAP 108 "11. Non- conformity Reporting Form"
С	Audit Serial No.	AU/YEAR/Division/### (e.g. Au/2025/OPS/002). Number sequentially per Supdt'I table for each calendar year	Supdt'I Controled
D	Finding Level	Tick 1, 2, 3 or Observation. using definitions: 1 = Critical direct-safety impact; 2 = Major indirect; 3 = Minor systemic.	
E	Repeated Findings	Tick "Yes" only if the same finding (identical root cause) was closed within the last 12 months.	
F	SSP Category Code	Choose the code from the ASD Risk-Profile table	CAP 108, Attachment C
G	Finding Reference	Tick Regulatory (cite KCASR) or Approved Documentation (e.g., Ops Manual). Give exact clause.	
Н	Finding Description	Write a clear, evidence-based statement: condition → regulatory requirement → evidence. Avoid opinions.	
Ι	Root Cause	Organisation performs root-cause analysis (e.g., Method: "5 Whys"). (i.e. Human Factors / Procedures / Training / Equipment / Management-System / External) and describe briefly.	
J	Proposed Corrective Action	Action(s) that eliminate the non-conformity. Must be specific, measurable, achievable, realistic, time-bound (SMART).	
K	Proposed Preventive Action	Systemic step(s) preventing recurrence (e.g., procedure rewrite, training, SMS hazard register update).	
L	Proposed Closure Date	Must fall within the policy closure-target window (see table in point 6) unless an extension is granted under CAP 108 - 11.	
M	CAP Submission – Head of Compliance Signature/Date	Date triggers the "30/45-day submission" clock monitoring by ASD.	





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#	Field on the form	How to complete	Policy reference
N	Inspector's Acceptance	Inspector signs/stamps once CAP meets policy criteria; if rejected, annotate "Returned for revision – date".	
o	Division-Head Approval	Confirms acceptance; ensures consistency of actions across the division.	
P	Closure Statement & Evidence	Organisation declares closure; attach evidence (records, photos, updated manuals, training logs).	
Q	Inspector's Verification	Verify evidence on-site or desk review; sign/stamp; record Actual Date Closed .	
R	Division-Head Verification	Final regulatory sign-off; forwards to Surveillance-tracking focal point for database entry and archiving.	

4 Common compliance pitfalls & how to avoid them

Pitfall	Avoidance tip			
	Record CAP-submission date (new field recommended) and se calendar reminders for 72 h $/$ 30 d $/$ 45 d cut-offs.			
Over-optimistic closure dates	Cross-check against policy maxima before accepting; require justification for shorter or longer timelines.			
Vague root causes	Insist on systemic causes (e.g., "Inadequate recurrent-training tracking" instead of "human error").			
Evidence missing	No closure without verifiable proof (signed training record, maintenance release, revised SOP section, etc.).			
	Maintain a division spreadsheet we may use an electronic tracking tool that auto-increments numbers.			

5 Document-control

• Retain signed originals (paper or PDF) in the Surveillance-tracking system for ≥ 5 years (10 years for Level 1) as per CAP 108 - 16.







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6 Quick-reference deadlines table (mirror of CAP 108)

Finding Level	CAP due	Closure target
1- Critical	≤ 72 h	Upon ASD verification
2- Major	≤ 30 d	≤ 90 d or agreed
3- Minor	≤ 45 d	≤ 120 d or agreed
4- Observation	As agreed	After closure of NC

(Extensions: written request by Accountable Manager, justified by risk assessment – CAP 108 - 11)

END