

## 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
<b>Header / General and Finding Details</b>	Inspector	Fill on-site. Assign a <b>serial number</b> (NC/Year/Division/###) and select the finding <b>level</b> (1, 2 or 3) as defined in CAP 108.
<b>Corrective-Action Plan (CAP)</b>	Certificate-holder (Head of Compliance)	Submit within the policy deadline ( $\leq 72$ h for Level 1; $\leq 30$ days for Level 2; $\leq 45$ days for Level 3).
<b>Division-Head Acceptance</b>	Inspector → Technical Division Head	Accept or request revision as per division acceptor timeframe.
<b>Closure Follow-up</b>	Certificate-holder then Inspector	Organisation declares closure; inspector verifies evidence and records <b>actual closure date</b> (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
<b>A</b>	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
<b>B</b>	Finding Serial No.	NC/Year/Division/###	CAP 108 “11. Non-

#	Field on the form	How to complete	Policy reference
		(e.g. NC/2025/OPS/002). Number sequentially per division for each calendar year.	conformity Reporting Form”
C	Audit Serial No.	AU/YEAR/Division/### (e.g. Au/2025/OPS/002). Number sequentially per Supdt'I table for each calendar year	Supdt'I Controlled
D	Finding Level	Tick 1, 2, 3 or Observation. using definitions: 1 = Critical direct-safety impact; 2 = Major indirect; 3 = Minor systemic.	CAP 108 “12. Classification of Findings”
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 <b>Regulatory</b> (cite KCASR) or <b>Approved Documentation</b> (e.g., Ops Manual). Give exact clause.	
H	Finding Description	Write a clear, evidence-based statement: condition → regulatory requirement → evidence. Avoid opinions.	
I	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 <b>eliminate</b> 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 <b>within the policy closure-target window</b> (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.	

#	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 <b>Actual Date Closed</b> .	
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
<b>Late CAP submission</b>	Record CAP-submission date (new field recommended) and set calendar reminders for 72 h / 30 d / 45 d cut-offs.
<b>Over-optimistic closure dates</b>	Cross-check against policy maxima before accepting; require justification for shorter or longer timelines.
<b>Vague root causes</b>	Insist on systemic causes (e.g., "Inadequate recurrent-training tracking" instead of "human error").
<b>Evidence missing</b>	No closure without verifiable proof (signed training record, maintenance release, revised SOP section, etc.).
<b>Serial-number duplication</b>	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.

## 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**