

Civil Aviation Authority of Fiji

Safety Management System Manual Acceptance

Form CA 102B

Name of organization seeking manual acceptance Brief details of consultative process (all stakeholders and results) if applicable. I certify that the manual referred to in this form fulfils the criteria laid out by ICAO in Doc 9859 as evidenced below. Signature Name of Officer: Date: COMMENT **PAGE ITEM NUMBER Document control procedures** 1) SMS regulatory requirements 2) Scope and integration of the SMS 3) 4) Safety policy Safety objectives 5) Safety accountabilities and key personnel 6) 7) Safety reporting and remedial actions 8) Hazard identification and risk assessment 9) Safety performance monitoring and measurement 10) Safety-related investigations and remedial 11) Safety training and communication 12) Continuous improvement and SMS audit 13) SMS records management 14) Management of change 15) Emergency / contingency response plan Signature/ **Comments by Stakeholders Date** CAS **CGS QAM** Ensure attached manual, and all amendments have been incorporated in this final **ACCEPTANCE/SIGN OFF** version and accepted by section heads. ☐ The above manual is accepted. ☐ The above request is not accepted/pending acceptance subject to – (Chief Executive) Signature: Effective Date: File No.

All actions completed. Attach copy of manual to this form & file:

(Signature/Date)