



U.S. DEPARTMENT OF TRANSPORTATION
FEDERAL AVIATION ADMINISTRATION

**ORDER
FS 8260.57**

Flight Standards Policy

Effective Date:
03/29/12

SUBJ: Oversight of Third Party Instrument Flight Procedure Service Providers

This order establishes Flight Standards Service (AFS) policy, guidance, and standardization for the oversight of third party Instrument Flight Procedure (IFP) service providers. Revisions will be made to this order based on organizational and industry needs, with management considerations and approval. The Flight Procedure Implementation and Oversight Branch is responsible for the maintenance of this order.

A handwritten signature in cursive script that reads "John M. Allen".

John M. Allen
Director, Flight Standards Service

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Table of Contents

| <i>Paragraph</i> | <i>Page</i> |
|---|-------------|
| Chapter 1. General Information | 1-1 |
| 1. Purpose of This Order..... | 1-1 |
| 2. Audience..... | 1-1 |
| 3. Where You Can Find This Order..... | 1-1 |
| 4. Responsibilities..... | 1-1 |
| Chapter 2. Surveillance..... | 2-1 |
| 1. General..... | 2-1 |
| 2. Analysis..... | 2-1 |
| Chapter 3. Audit Process..... | 3-1 |
| 1. General..... | 3-1 |
| 2. Initiating an Audit..... | 3-1 |
| 3. Pre-Audit Activities..... | 3-2 |
| 4. Conducting the Audit..... | 3-3 |
| 5. Post Audit Activities..... | 3-5 |
| 6. Follow-up Activities..... | 3-6 |
| 7. Audit Record Maintenance..... | 3-7 |
| Chapter 4. Compliance Process | 4-1 |
| 1. General Overview..... | 4-1 |
| 2. Informal Compliance Process..... | 4-1 |
| 3. Formal Compliance Process..... | 4-4 |
| Appendix A. Figures and Forms..... | A-1 |
| Appendix B. Administrative Information..... | B-1 |
| 1. Distribution..... | B-1 |
| 2. Definitions..... | B-1 |
| 3. Related Publications (current editions)..... | B-1 |
| 4. Authority..... | B-2 |

List of Figures

| <i>Figure</i> | <i>Page</i> |
|--|-------------|
| A-1. Annual Audit Schedule | A-1 |
| A-2. Audit Requirements Checklist Template | A-2 |
| A-3. Audit Plan Template | A-3 |
| A-4. Audit Notification Template | A-7 |
| A-5. Pre-Audit Team Briefing Checklist | A-8 |
| A-6. Opening Meeting Checklist | A-9 |
| A-7. Closing Meeting Checklist..... | A-10 |
| A-8. Audit Process Feedback Form | A-11 |
| A-9. AFS-460 Stakeholder Feedback Log | A-13 |
| A-10. Audit Report Template | A-15 |
| A-11. Audit Report Cover Memo Template | A-21 |
| A-12. Informal Compliance Resolution Flowchart..... | A-21 |
| A-13. Request for Additional Information Template..... | A-23 |
| A-14. Status Update Template | A-24 |
| A-15. Acceptance of Corrective Actions Template | A-24 |
| A-16. Closure of Safety Compliance Issue Template..... | A-25 |
| A-17. Formal Compliance Flowchart | A-26 |
| A-18. Compliance Process Notice of Investigation Template | A-28 |
| A-19. Notice of No Action Template..... | A-30 |
| A-20. Compliance Process Notice of Correction Template..... | A-29 |
| A-21. Compliance Process Warning Notice Template | A-31 |
| A-22. Compliance Process Safety Directive Template..... | A-32 |
| A-23. AFS-460 Compliance Process Stakeholder Feedback Form | A-33 |

Chapter 1. General Information

1. Purpose of This Order. This order establishes Flight Standards Service (AFS) policy, guidance, and standardization for the oversight of third party Instrument Flight Procedure (IFP) development, maintenance, and validation of Title 14 of the Code of Federal Regulations (14 CFR) parts 95 and 97 standard or special instrument procedures.

2. Audience. The primary audience for this order is AFS, Flight Technologies and Procedures Division, AFS-400, primarily AFS-460, who is directly associated with the Federal Aviation Administration (FAA) oversight process and/or charged with the responsibility to qualify and provide oversight of third party service providers. The secondary audience for this order is prospective third party IFP service providers, hereafter referred to as "Service Provider," who have been authorized by the FAA to develop Title 14 of the Code of Federal Regulations (14 CFR) parts 95 and 97 standard or special instrument procedures.

3. Where You Can Find This Order. Inspectors can access this order through the Flight Standards Information Management System (FSIMS) at <http://fsims.av.s.faa.gov>. Operators may find this information on the FAA's Web site at <http://fsims.faa.gov>.

4. Responsibilities.

a. Oversight. Provide oversight of third party IFP development, maintenance, and validation of instrument procedures.

b. Implementation and Validation. Provide assistance in the implementation and validation of IFP standards, criteria, software, policy, and procedures for Title 14 of the Code of Federal Regulations (14 CFR) parts 95 and 97.

c. Evaluate and Recommend. Evaluate and recommend approval/disapproval on requests for IFP waiver of standards.

d. Monitor, Analyze, and Evaluate. Monitor, analyze, and evaluate the execution of approved IFP programs within the FAA to determine compliance with established procedure maintenance policy.

e. Technical and Risk Assessment. Provide technical and risk assessment of IFP operations not covered by standard criteria.

f. Flight validation. AFS-460 is the focal point for flight validation policy of satellite-based and performance-based navigation IFPs.

g. Coordination and Processing. AFS-460 is the FAA focal point for the coordination and processing of special instrument procedure and waiver requests.

h. Evaluations, Simulations, and Testing. Perform operational evaluations, simulations and in-flight testing of standards and criteria proposed for en route and terminal IFPs and navigation systems. This includes the flight simulator (SIM) evaluation of specials/waivers and Performance-Based Navigation (PBN) IFPs to ensure adherence to criteria and provide oversight.

i. Approve and Audit. Approve and audit all IFP design training courses, for content and curriculum to determine conformance with applicable criteria, standards, and policies.

Chapter 2. Surveillance

1. General. Surveillance occurs daily with or without normal day-to-day interaction with IFP service providers (i.e., procedure review board procedures, Instrument Flight Procedure Validation (IFPV) activities, etc.). Observation of negative trends will require an audit to determine if the issue is a system wide problem or is provider specific. See chapter 3. The following methods of surveillance are conducted to ensure continuing compliance.

a. Operations Manual. As a minimum, AFS-460 will review IFP service provider's operations manual annually for compliance with all applicable guidance outlined in FAA Advisory Circular (AC) 90-110, Authorization Guidance for Development of Required Navigation Performance Procedures with Authorization Required by Third Party IFP Service Providers.

b. Software Validation. AFS-460 will ensure IFP service providers meet or exceed requirements identified in FAA Advisory Circular (AC) 90-111, Guidance for the Validation of Software Tools Used in the Development of Instrument Flight Procedures by Third Party Service Providers, and will manage the program through the AFS-460 website.

c. Procedure Review Board. A panel including Terminal Instrument Procedures (TERPS) and operational specialties review procedures scheduled by the procedure review board. The end product is a documented operational safety assessment.

d. IFPV Activities. AFS-460 will manage and direct oversight of all IFPV activities in accordance with FAA Order 8900.1, Flight Standards Information Management System.

e. Simulator Evaluations. AFS-460 will conduct simulator evaluations of Required Navigation Performance (RNP) Authorization Required (AR) procedures in accordance with FAA Order 8900.1.

2. Analysis. AFS-460 will analyze surveillance results for trends and take appropriate action when there is a negative trend (safety critical issues require immediate action/resolution). The action taken will be informal compliance resolution or the scheduling of an official audit. The safety risk will determine the appropriate course of action.

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Chapter 3. Audit Process

1. General.

a. Risk-Based System Audits. AFS-460 conducts risk-based system audits to determine an IFP service provider's compliance with safety policies, processes, and practices for managing all aspects of IFP design.

b. Service Provider Visits. The AFS Business and Performance Plan notes the minimum number of service providers visited by AFS-460 each fiscal year (FY) to conduct audits; the basis for this number is available resources. Service providers can expect an annual visit.

2. Initiating an Audit.

a. AFS-460 will Initiate Audits Based On:

- (1) Surveillance,
- (2) User Complaints,
- (3) Incidents or Accidents,
- (4) A safety compliance issue, and
- (5) A requirement in the AFS Business and Performance Plan.

b. Audit Formats. AFS-460 can initiate an audit in any format (i.e., written request, e-mail, and memorandum).

c. Annual Audit Schedule. The audit and compliance program manager develops a schedule using the AFS-460 Annual Audit Schedule Form (see figure a-1) and submits it to the Branch and/or Division Manager for approval. The approved schedule is posted on the AFS-460 Oversight SharePoint site at least 45 calendar days before the beginning of the FY.

d. Assignment of Project Number. The audit and compliance program manager assigns a unique project number for the audit and uses it when entering audit information into the Audit and Compliance Tracking Log. The recording convention for the project number is "ADT-FY00-000." Note the following example: ADT-FY11-001. In this project number, the "11" indicates the FY, and "001" is a sequential three-digit number indicating the specific project. Therefore, this project number indicates the first audit assigned in FY 2011. The project number must be used on all documents relating to the audit.

e. Team Leader, Sub-Team Leaders, and Team Members. The Branch Manager selects an audit team leader (sub-team leaders if applicable) and team members based on (but not limited to) the following factors:

- (1) Qualifications,
- (2) Conflict of interest issues,
- (3) Area of expertise, and
- (4) Availability.

3. Pre-Audit Activities.

a. Collection, Review, and Analysis of Data.

(1) The audit team leader (or designee) gathers orders, directives, and other pertinent documentation related to the process or procedure for audit. The audit team leader will coordinate requirements for more information with the Branch Manager. Pertinent documentation may include the following:

- (a) Audited facility's relevant records, manuals, procedures, etc.
 - (b) Historical information (databases, evaluation reports, etc.).
- (2) The audit team leader works with the Branch Manager to finalize the audit scope.

b. Development of Requirements Checklist. The audit team leader develops the audit requirements checklist using the Audit Requirements Checklist template (see figure a-2).

(1) The audit team will use the audit requirements checklist to document evidence reviewed or observed during the audit and to assist the team in determining service provider compliance with requirements and safety standards.

(2) The audit team leader must ensure that copies of applicable requirements and procedures needed to conduct the audit are available for the team's use during the audit.

(3) The audit team leader will submit the audit requirements checklist (see figure a-2) with the audit plan for review and approval by the Branch Manager and/or Division Manager prior to the onsite start of the audit.

c. Audit Plan Preparation. The audit team leader prepares the audit plan using the Audit Plan Template (see figure a-3) and forwards it to the Branch Manager for review. Include the following information:

(1) Recommended specific audit location(s) based on the results of research and analysis of data.

(2) Provide written justification for the audit location(s). Description of the reason(s) for the selection(s) may include but is not limited to the following:

- (a) Specific surveillance items associated with the system or procedure.
 - (b) Likelihood and severity of incidents or accidents associated with the system or procedure resulting from obsolete criteria, software, or procedure(s).
 - (c) Number of reported incidents or complaints (high, medium, low) related to the system or procedure.
- (3) The Branch Manager reviews the audit plan and then forwards it to the branch secretary for internal coordination and submission to the Division Manager for approval.

d. Notification.

(1) **Scheduled Audits.** After coordinating audit dates with service provider management, the audit team leader prepares an official notification letter from the Division Manager to the service provider manager using the Audit Notification Template (see figure a-4).

(a) The notification letter is forwarded to the Branch Manager for review/approval then to the branch secretary for internal coordination and submission to the Division Manager for signature.

(b) Upon receipt from the Division Manager, the branch secretary sends the signed notification letter to the service provider at least 45 calendar days before the onsite start of the audit. A copy of the notification letter is posted in the AFS-460 Oversight SharePoint site.

(2) **Unscheduled Audits.** An unscheduled audit does *not* require written notification to the Division Manager. The Branch Manager verbally advises Division and service provider managers at least 12 hours before the scheduled arrival of the audit team and coordinates access to the facility scheduled for audit.

e. Team Folder Preparation. The audit team leader and/or sub team leader ensures that team members prepare team folders that include documentation needed to conduct the audit. Audit folders may include a copy of the approved audit plan and notification (for scheduled audits only), requirements checklist and team leader checklists for each location, copies of pertinent directives/orders, team member and pertinent AFS management contact information (i.e., branch manager, audit and compliance program manager), logistical and scheduling information (i.e., travel itineraries, rental car, lodging, meeting places and times), and other necessary documents.

f. Pre-Audit Briefing. The audit team leader conducts a pre-audit team briefing using the Pre-Audit Team Briefing Checklist (see figure a-5) before the onsite audit. It is a requirement that team members attend and ensure that the audit team leader covers all checklist items.

4. Conducting the Audit. It is an expectation that audit team members carry out their audit tasks using appropriate tools and techniques, and not to interfere with the facility's operations.

a. Opening Meeting. The audit team leader or sub-team leader (if applicable) conducts the opening meeting with the audited party using the Opening Meeting Checklist (see figure a-6). Team members must attend and ensure that the team leader or sub-team leader covers all checklist items.

b. Collection and Verification of Data. Audit team members use the audit requirement checklists to record information that could indicate noncompliance with the requirement noted in the checklist. When necessary, audit team members may request copies of pertinent documentation.

(1) Possession and security of the property provided by the service provider (i.e., original documents, equipment, furnishings) for use by the auditors during the audit is the team leader's responsibility.

(2) The team leader or sub-team leader must ensure that the team:

- (a) Exercises care in the use of that property,
- (b) Prepares an inventory of any original documents received,
- (c) Verifies if the item is suitable for the intended use,
- (d) Protects and safeguards property from damage or loss, and
- (e) Ensures the safe return of service provider property when required.

(3) If any item belonging to a service provider is lost, or damaged, the audit team leader or sub-team leader must report it to the service provider and the audit and compliance program manager. The audit and compliance program manager must maintain a record of the incident.

c. Recording Findings. Identifying and Reporting Findings.

(1) **Safety Critical Finding.** This is a finding that indicates the existence of a severe operational discrepancy that adversely affects the safety of the NAS. Team members must immediately notify the audit team leader or sub-team leader of any suspected safety critical finding. The audit team leader or sub-team leader must immediately report the finding to and seek guidance from the Branch Manager. If the Branch Manager acknowledges the finding as safety critical, he/she must then notify the Division Manager or designee and will require immediate resolution. The audit team leader or sub-team leader must then notify the audited party of the finding. A safety critical finding will enter the formal compliance process for tracking and resolution.

(2) **Safety Hazard Finding.** This finding indicates noncompliance with a safety standard or requirement that results in a hazard in the NAS. The Branch and/or Division Manager determine whether a safety hazard finding will be handled by the formal or informal compliance process for tracking and resolution.

(3) **Safety Compliance Findings.** Safety Compliance findings indicate a failure to follow safety standards; however, has not yet produced a safety hazard. The audit report notes these findings, and the decision as to whether follow-up action is required. The audit team leader (unless otherwise assigned by the Branch Manager) will track and resolve observations requiring follow-up action from the service provider.

(4) **Observations.** Observations document a procedure, practice, or activity of a positive or negative nature observed during the audit. The audit team leader (unless otherwise assigned by the Branch Manager) will track and resolve negative observations requiring follow-up action from the service provider.

d. Team Briefings.

(1) **Daily Team Briefings.** The purpose of team briefings is to allow team members the opportunity to update the audit team leader or sub-team leader on the progress of the audit. The audit team leader and sub-team leader can schedule team briefings at anytime during an audit. Sub-team leaders assigned to multiple audit teams will brief and/or update the audit team leader daily.

(2) **Final Team Briefing.** The audit team leader and sub-team leader conduct a final team briefing to discuss the audit results and reach a consensus on data provided to the audited facility during the closing meeting. The audit team leader and sub-team leader make the final decision if the team cannot reach a consensus. The audit team leader and sub-team leader contacts the Branch Manager to discuss the audit results, outstanding actions, and any issues or concerns prior to conducting the closing meeting.

(3) **Closing Meeting.** The audit team leader and sub-team leader conduct a closing meeting with personnel of the audited facility using the Closing Meeting Checklist (see figure a-7). Team members must attend and ensure that the audit team leader covers all checklist items. At the conclusion of the closing meeting, the audit team leader and sub-team leader provide the audited party with an Audit Process Feedback Form (see figure a-8). Personnel at the audited facility receive this form to solicit feedback specific to the audit process. Completing this form is optional. All audit process feedback forms issued to and received from the service provider are recorded on the AFS-460 Stakeholder Feedback Log (see figure a-9). The audit and compliance program manager analyzes feedback information and reports the results to the Branch Manager for the AFS division analysis of data meeting.

5. Post-Audit Activities. Upon completion of the onsite portion of the audit, the team must complete the following activities:

a. Post-Audit Team Meeting. During the Final Data Review, the team reviews and analyzes the requirements checklist and data gathered during the audit. The audit team leader will coordinate requirements for more information with the Branch Manager. The Branch Manager will notify the service provider. The audit concludes 7 calendar days after the collection of all data.

b. Validation Meeting. The audit team leader contacts the Division Manager through the Branch Manager as soon as possible after their return to determine the resolution of the audit findings.

(1) All safety compliance issues will be resolved in accordance with the compliance process as outlined in chapter 4.

(2) The audit and compliance program manager documents all safety critical, safety hazard, safety compliance findings and/or negative observations on the Audit and Compliance Tracking Log for resolution.

(3) Unless otherwise assigned by the Branch Manager, the audit team leader is responsible for ensuring the completion of all items requiring follow-up (informal and formal safety compliance issues, other findings or negative observations).

c. Audit Report. The audit team leader completes the audit report using the Audit Report Template (see figure a-10). The audit team leader submits a draft audit report to the branch manager at the conclusion of the audit (within 7 calendar days after collecting all data). The Branch Manager forwards the draft audit report to the branch secretary for correspondence control.

d. Audit Report Cover Memo. The audit and compliance program manager or designee prepares and submits the cover memorandum to the Branch Manager using the Audit Report Cover Memo Template (see figure a-11). The Branch Manager or designee forwards the cover memorandum to the branch secretary for correspondence control.

e. Submission of Audit Report to AFS-400. After receiving approval from the Branch Manager, the branch secretary submits the audit report cover memorandum and audit report to the Division Manager and other staff members (as appropriate) for signature and distribution. The branch secretary ensures the attachment of all required documents. The Division Manager receives the audit report within 21 calendar days after audit conclusion. Send an interim notification to the Division Manager in the event that the audit report is not complete within 21 calendar days.

6. Follow-up Activities.

a. Follow-up Audits. Safety critical, hazard, or compliance findings and/or negative observations requiring follow-up action are entered into the informal or formal compliance process for resolution. Requests for a follow-up audit are submitted by the audit team leader, assigned staff specialist or Branch Manager and require approval by the Division Manager. Approved follow-up audits will be scheduled as determined by the Branch Manager. The audit request may be communicated in any manner (written request, e-mail, memorandum, etc.).

b. Number Assignments. The audit and compliance program manager assigns a single digit sequential number after the project number (for example, ADT-FY-11-001-1) to indicate the follow-up audit. The project number and the words "Follow-up Audit" must be included on all documents and records dealing with the follow-up audit.

c. Conduct a Follow-up Audit. Conduct a follow-up audit in accordance with paragraphs 4a-d, 5a-c and 6d. The audit team will complete other sections of this process at the discretion of the division manager.

d. Report Follow-up Audit Results to Division Manager. The audit team leader prepares the follow-up audit report (or appropriate memorandum to initiate or close safety compliance issues in accordance with the AFS-460 compliance process). The report or memorandum is sent to the Division Manager (and other staff members as appropriate) in order to report the results of the follow-up audit. Submit the report or memorandum to the Division Manager within 14 calendar days following the conclusion of the follow-up audit.

7. Audit Record Maintenance. The audit and compliance program manager ensures the establishment of audit records in accordance with this process and entered into the AFS-460 SharePoint site. Keep the following records on file:

- a. Annual Audit Schedule,**
- b. Audit Plan,**
- c. Audit Notification Memo (scheduled audits only),**
- d. Audit Team Leader Checklists,**
- e. Audit Process Feedback Form,**
- f. Audit Report (including cover memo, requirement checklists, etc.),**
- g. Follow-up Audit Memorandum, and**
- h. All other relevant information as deemed appropriate.**

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Chapter 4. Compliance Process

1. General Overview. The compliance process begins with the informal compliance process, which provides an avenue for corrective action at the lowest organizational level. However, if it is not possible to resolve the noncompliance at lower levels (for example, if a policy in need of change), AFS-400 senior management will work with service provider's senior management on a one-to-one basis to achieve corrective action and prevent escalation of the matter to the formal compliance process. If the informal process does not obtain a resolution, AFS will follow a formal approach investigating and resolving the service provider's noncompliance. If the service provider fails to take the necessary actions to prevent continued noncompliance, the final step in this process is the issuance of a safety directive ordering the service provider to take the safety-related measures outlined.

2. Informal Compliance Process.

a. Safety Compliance. The Branch Manager receives notification of a Safety Critical, Hazard or Compliance finding and/or negative observation (see figure a-12). If a staff specialist identifies or receives notification of the finding or observation, he or she will inform the AFS-460 Manager. Sources of a safety compliance issue include, but are not limited to:

- (1) Service provider voluntary disclosure,
- (2) Surveillance,
- (3) Audit results,
- (4) Accidents / Incidents, and
- (5) Other sources (i.e., Office of Inspector General, the National Transportation Safety Board (NTSB), and whistleblower program).

b. Documentation of a Safety Compliance Issue. The audit and compliance program manager documents the safety compliance issue on the Audit and Compliance Tracking Log and notes the SMS requirement as defined in an approved service provider's operations manual or safety standard allegedly in violation. The audit and compliance program manager also attaches any pertinent documentation as needed.

c. Validation of a Safety Compliance Issue. The Branch Manager determines whether the information regarding the safety compliance issue is valid and if the allegation is valid, verifies the service provider's noncompliance with the SMS requirement or safety standards.

(1) If the issue is invalid, or if there is no safety issue, the Branch Manager notifies the individual (who identified or received notification of the issue) of the determination. The audit and compliance program manager updates the Audit and Compliance Tracking Log and closes the issue.

(2) If the issue is valid, the Branch Manager coordinates with the audit and compliance program manager for assignment of a compliance issue number in the Audit and Compliance Tracking Log. The number consists of COMP-FY, two-digits indicating the FY of issue identification, and a two-digit sequential number for that issue, (i.e., COMP-FY11-01). Use this unique number on all out-going correspondence related to the safety compliance issue.

d. Assignment of a Safety Compliance Issue. The Branch Manager assigns the compliance issue to a staff specialist.

Note: The assigned staff specialist does not have to be the same employee who identified or received notification of the issue.

Note: For informal compliance issues identified during an audit, the audit team leader is considered the assigned staff specialist, unless otherwise assigned by the Branch Manager.

e. Attempted Resolution by the Assigned Staff Specialist.

(1) The assigned staff specialist prepares a Request for Additional Information; Safety Compliance Issue COMP-FYXX-XX letter (see figure a-13) from the Branch Manager to the appropriate service provider manager. This letter initiates the informal compliance procedure by requesting that the service provider submit additional information within 21 calendar days of receipt, or by the due date assigned by the Branch Manager. Use either date to help resolve the safety compliance issue. The audit and compliance program manager updates the status on the Audit and Compliance Tracking Log and forwards the letter to the branch secretary for the Branch Manager's review and approval. Place a copy of the approved letter into the AFS-460 SharePoint site.

Note: When initiation of an informal compliance issue did not originate from an audit, the subject of the letter will be noted as Request for Additional Information; Informal Safety Compliance Issue COMP-FYXX-XX.

Note: If the informal safety compliance issue was found during an audit, the Audit Report Cover memo will initiate the informal compliance procedure prepared in accordance with the audit process as outlined in this order. The memo requests service provider response within 21 calendar days of receipt or by the due date assigned by the Branch Manager.

(2) After sending the initial letter, the assigned staff specialist attempts to resolve the issue through e-mail, telephone conversation, or by meeting with service provider personnel. If directed by the Branch Manager, attempt a resolution by working with other service provider employees. The audit and compliance program manager places all pertinent documentation (i.e., electronic messages, record of conversation, meeting minutes, and correspondence) into the AFS-460 SharePoint site and updates the status on the Audit and Compliance Tracking Log.

(3) For resolutions received from the service provider counterpart within 21 calendar days of receipt, or by the due date assigned by the Branch Manager, the assigned staff specialist coordinates with the Branch Manager to determine if the resolution is acceptable. Depending on

the complexity of the safety compliance issue, this step may take a significant amount of time for information exchange between AFS-460 and the service provider.

(a) If the resolution review process will exceed 45 calendar days of receipt, the assigned staff specialist prepares a Status Update; Safety Compliance Issue COMP-FYXX-XX letter (see figure a-14) from his or her Branch Manager to the appropriate service provider manager. Use this letter when AFS-460 is still reviewing information received from the service provider and will provide an official response at a later date. The audit and compliance program manager updates the status on the Audit and Compliance Tracking Log and forwards the letter to the branch secretary for the Branch Manager's review and approval. Place a copy of the approved letter into the AFS-460 SharePoint site.

(b) If the resolution is acceptable, the assigned staff specialist prepares an Acceptance of Corrective Actions; Safety Compliance Issue COMP-FYXX-XX letter (see figure a-15) within 45 calendar days of receipt of the service provider's response from the Branch Manager to the appropriate service provider manager. Use this letter when AFS-460 accepts the service providers' corrective action plan and will monitor its implementation. The audit and compliance program manager updates the status on the Audit and Compliance Tracking Log and forwards the letter to the branch secretary for the Branch Manager's review and approval. Place a copy of the approved letter into the AFS-460 SharePoint site.

(c) Using objective evidence and compliance verification data, the assigned staff specialist prepares a Closure of Safety Compliance Issue COMP-FYXX-XX letter (see figure a-16). Fill out the appropriate blocks on the AFS-460 Compliance Process Stakeholder Feedback form (see figure a-23) and attach it to the letter. The audit and compliance program manager updates the status on the Audit and Compliance Tracking Log and forwards the letter and attached feedback form to the branch secretary for the Branch Manager's review and approval. Place a copy of the approved letter into the AFS-460 SharePoint site.

Note: All letters used during this phase are prepared for the Branch Manager's approval. Examples of these letters are located in the appendices or on the AFS-460 SharePoint site under the heading of "Forms." Prepare letters in accordance with FAA branding.

Note: Electronic-mail (e-mail) is an acceptable form of communication for written status updates.

(d) If the resolution is not acceptable, the assigned staff specialist elevates the issue to the Branch Manager. The audit and compliance program manager updates the Audit and Compliance Tracking Log to indicate the elevation of the issue to the Branch Manager for resolution.

(4) For resolutions not proposed or not received within 21 calendar days or by the due date assigned by the Branch Manager, consider elevating the issue to the Branch Manager for resolution. The audit and compliance program manager updates the status of the issue on the Audit and Compliance Tracking Log. If elevating the issue to the Branch Manager, the audit and

compliance program manager updates the Audit and Compliance Tracking Log to show the elevation of the issue to the Branch Manager for resolution.

f. Attempted Resolution by the Branch Manager.

(1) The Branch Manager attempts resolution with his or her counterpart at service provider's directorate level requesting that the service provider submit requested information to the Branch Manager within the timeframe established. Use this information to resolve the safety compliance issue.

Note: All pertinent documentation generated or received by the Branch Manager (i.e., electronic messages, record of conversation, meeting minutes, and correspondence) will be forwarded to the audit and compliance program manager for entry into the AFS-460 SharePoint site and status update of the Audit and Compliance Tracking Log.

(2) The Branch Manager receives a response from his or her service provider counterpart and determines if the resolution is acceptable. Depending on the complexity of the safety compliance issue, this step may take a significant amount of time for information exchange between the Branch Manager and the service provider.

(a) If the resolution is acceptable, the assigned staff specialist prepares one of the following letters within 45 calendar days of receipt of the response from the service provider:

1. Request for additional information,
2. Status update,
3. Acceptance of corrective actions, and
4. Closure of safety compliance issue.

(b) The audit and compliance program manager updates the status on the Audit and Compliance Tracking Log and forwards the letter to the branch secretary for the Branch Manager's review and approval. Place a copy of the approved letter into the AFS-460 SharePoint site.

(c) If there is no resolution proposed or received within the due date established by the Branch Manager, the safety compliance issue will enter the formal compliance process. The audit and compliance program manager updates the Audit and Compliance Tracking Log and the compliance changes the status from informal to formal.

3. Formal Compliance Process.

a. Safety Compliance Issues. A safety compliance issue will enter the formal compliance process (see figure a-17) as a result of one of the following:

- (1) The informal compliance process fails to result in correction of the safety compliance issue,
- (2) Data indicates that the safety compliance issue requires urgent resolution, and
- (3) The Division Manager instructs that a safety critical or safety compliance issued identified during an AFS-460 audit will receive formal resolution.

Note: Although safety compliance issues may skip the informal process and enter directly into the formal process, the Branch Manager or designee ensures the completion of steps 1 through 4 of the informal process.

b. Assigning a Unique Number. If applicable, the audit and compliance program manager assigns a unique number using the Audit and Compliance Tracking Log, in accordance with chapter 4 paragraph 2c(2). However, an informal safety compliance issue that enters the formal compliance process will use the same number issued during the informal process. Use this unique number on all out-going correspondence related to the safety compliance issue.

c. Staff Specialist Responsibilities. The assigned staff specialist for an informal safety compliance issue that has entered the formal compliance process is responsible for ensuring resolution of the safety compliance issue, unless otherwise assigned by the Branch Manager.

d. Assigned Staff Specialist. When the Division Manager refers a safety compliance issue resulting from an AFS-460 audit to the formal compliance process, the audit team leader is considered the assigned staff specialist unless otherwise assigned by the Branch Manager. He or she contacts the audit and compliance program manager to obtain a safety compliance issue number for each safety compliance issue.

e. Issues Not Resulting from Informal Compliance. If the safety compliance issue did not result from the informal compliance process or an AFS-460 audit, the safety compliance issue is coordinated with the Division Manager. The safety compliance issue is then assigned to a staff specialist by the Branch Manager.

f. Written Status Update. AFS-460 will provide a written status update within 45 calendar days of receipt of a service provider response. The status update letter will notify the service provider that AFS-460 is still reviewing information provided and will provide the date that AFS will provide an official response. Send all formal correspondence entering or exiting AFS-460 to the branch secretary for correspondence control.

g. AFS-460 issues a Notice of Investigation (NOI). The NOI is the first step in the formal compliance process (see figure a-18).

- (1) The assigned staff specialist prepares an NOI within 14 calendar days after notification of a suspected noncompliance issue. The Branch Manager sends the NOI to the service provider using the NOI template, and writes it in accordance with figure a-18 and FAA branding guidelines. The NOI may also include a request for information.

(2) The audit and compliance program manager updates the status on the Audit and Compliance Tracking Log and forwards the letter to the branch secretary for the branch manager's review and approval. Place a copy of the approved letter into the AFS-460 SharePoint site.

(3) The branch secretary or designee delivers the NOI to the service provider (and sends an electronic copy via e-mail to other agencies, as appropriate) within three calendar days of AFS management approval and will receive a delivery confirmation from the recipient. Place a copy of the approved letter into the AFS-460 SharePoint site and update the issue status on the Audit and Compliance Tracking Log.

h. AFS-460 Receives Response to NOI.

(1) It is a requirement that the service provider respond to AFS-460 within 14 calendar days of receipt of an NOI. If the service provider fails to respond within 14 calendar days, AFS-460 will issue a Warning Notice.

(2) Upon receipt, the assigned staff specialist will review the NOI response to determine additional information requirements.

(a) Additional information required by the assigned staff specialist is accomplished by preparing a Request for Additional Information letter from the Branch Manager with division manager or designee concurrence to the service provider directorate level within 45 calendar days of receipt of the service provider response. The audit and compliance program manager updates the status on the Audit and Compliance Tracking Log and forwards the letter to the branch secretary for the Branch Manager's review and approval. Place a copy of the approved letter into the AFS-460 SharePoint site.

Note: Depending on the complexity of the compliance issue, this process may take a significant amount of time due to the need for reciprocal communication with the service provider.

(b) If no additional information is required, the process continues below.

(3) The Branch Manager coordinates with the Division Manager or designee to determine if a violation has occurred and documents the decision.

(a) If a violation has not occurred, the Branch Manager notifies the assigned staff specialist. The assigned staff specialist prepares a Notice of No Action letter (see figure a-19) within 45 calendar days of receipt of the service provider's response from the Branch Manager with Division Manager or designee concurrence to the service provider's Vice President using the Notice of No Action template in accordance with FAA branding guidelines and this process. The Notice of No Action letter informs the service provider that a noncompliance has not occurred and documents the suspected safety compliance issue as invalid. The audit and compliance program manager updates the status on the Audit and Compliance Tracking Log and forwards the letter to the branch secretary for the Branch Manager's review and approval. Place a copy of the approved letter into the AFS-460 SharePoint site.

(b) If a violation has occurred, the Division Manager determines if actions taken correct the situation leading to the violation.

(c) A corrected violation requires the assigned staff specialist to prepare a Notice of Correction letter from the Division Manager to the service provider's Vice President within 45 calendar days of receipt of the service provider's response using the Notice of Correction template and in accordance with figure a-20 and FAA branding guidelines. The Notice of Correction is the final step in the formal compliance process and documents service provider correction of the identified noncompliance. The audit and compliance program manager updates the status on the Audit and Compliance Tracking Log and forwards the letter to the branch secretary for the Branch Manager's review and approval. Place a copy of the approved letter into the AFS-460 SharePoint site.

(d) Uncorrected violations require issuance of a Warning Notice and the process continues below.

i. AFS-460 Issues a Warning Notice.

(1) AFS-460 with Division Manager concurrence issues a Warning Notice to the service provider notifying that immediate action is required to correct a safety compliance issue. This notice serves as a warning to the service provider that an uncorrected issue results in issuance of a Safety Directive mandating specified action.

(2) Using the Warning Notice template (see figure a-21), the assigned staff specialist prepares a Warning Notice letter from the Branch Manager with Division Manager concurrence to the service provider's Vice President requesting the service provider to respond within 14 calendar days of receipt. Write the letter in accordance with figure a-21 and FAA branding guidelines. The audit and compliance program manager updates the status on the Audit and Compliance Tracking Log and forwards the letter to the branch secretary for the Branch Manager's review and approval. Place a copy of the approved letter into the AFS-460 SharePoint site.

(3) The branch secretary or designee delivers the Warning Notice to the service provider (and sends an electronic copy via e-mail to other agencies, as appropriate) within three calendar days of AFS management approval and will receive delivery confirmation from the recipient. Place a copy of the approved letter into the AFS-460 SharePoint site and update the issue status on the Audit and Compliance Tracking Log.

j. AFS-460 Receives Response to Warning Notice.

(1) It is a requirement that the service provider respond in writing to AFS-460 within 14 calendar days of receipt of a Warning Notice. If the service provider fails to respond within 14 calendar days, AFS-460 will issue a Safety Directive.

(2) The Branch Manager coordinates with the Division Manager or designee to validate the safety compliance issue corrective action and document the decision.

(a) A corrected violation requires the assigned staff specialist to prepare a Notice of Correction letter from the Division Manager to the service provider's Vice President within 45 calendar days of receipt of the response from the service provider using the Notice of Correction template. Write the letter in accordance with figure a-20 and FAA branding guidelines. Fill out the appropriate blocks on the AFS-460 Compliance Process Stakeholder Feedback form and attach it to the letter (see figure a-23). The audit and compliance program manager updates the status on the Audit and Compliance Tracking Log and forwards the letter and attached feedback form to the branch secretary for the Branch Manager's review and approval. Place a copy of the approved letter into the AFS-460 SharePoint site.

(b) The process for violations not appropriately corrected continues as explained below.

k. AFS-460 Issues a Safety Directive.

(1) A safety directive issued by AFS-460 with AFS-400 concurrence mandates that the service provider take immediate corrective action to resolve noncompliance with a safety related issue.

(a) If the violation involves an Other Transaction Agreement (OTA) vendor, the Division Manager or Director, Flight Standards Service (AFS-1) as appropriate will initiate or direct immediate action to revoke the letter of authorization, approval letter, or certificate (as applicable). Forward all pertinent documentation generated or received (i.e., electronic messages, record of conversation, meeting minutes, and correspondence) to AFS-460 for entry into the AFS-460 SharePoint site and status closure on the Audit and Compliance Tracking Log.

(b) For other service providers, AFS-460 with AFS-400 concurrence directs the service provider to cease further development of IFP operations with the FAA and/or suspend the use of published instrument approach procedures (IAP) by NOTAM action until the violation issue is resolved.

(2) The assigned staff specialist prepares a Safety Directive letter from the Branch Manager to the service provider's Vice President requesting a response within 7 calendar days of receipt. Write and format the letter according to the Safety Directive template and in accordance with figure a-22 and FAA branding guidelines. The assigned staff specialist or audit and compliance program manager updates the status on the Audit and Compliance Tracking Log and forwards the letter to the branch secretary for the Branch Manager's review and approval. Place a copy of the approved letter into the AFS-460 SharePoint site.

(3) The branch secretary or designee delivers the safety directive letter to the service provider (and sends an electronic copy via e-mail to other agencies, as appropriate) within three calendar days of the AFS management approval and receives delivery confirmation from the recipient. Place a copy of the approved letter into the AFS-460 SharePoint site and update the issue status on the Audit and Compliance Tracking Log.

l. AFS-460 Receives a Response to Safety Directive.

(1) The service provider must respond to AFS in writing within 7 calendar days of receipt of a Safety Directive.

(2) Once AFS-460 verifies the correction of the violation, the assigned staff specialist prepares a Notice of Correction letter from the Branch Manager with Division Manager or Director, Flight Standards Service (AFS-1) concurrence as appropriate to the service provider's Vice President within 45 calendar days of receipt of the service provider's response. Write and format this letter according to the Notice of Correction template and in accordance with figure a-20 and FAA branding guidelines. Fill out the appropriate blocks on the AFS-460 Compliance Process Stakeholder Feedback form (see figure a-23) and attach it to the letter.

(3) The audit and compliance program manager updates the status on the Audit and Compliance Tracking Log and forwards the letter and attached feedback form to the branch secretary for the Branch Manager's review and approval. Place a copy of the approved letter into the AFS-460 SharePoint site.

m. Enforcement.

(1) OTA (Other Transaction Agreement) Vendors.

(a) Disputes. Where possible, disputes will be resolved by informal discussion between the parties. In the event the parties are unable to resolve any disagreement through good faith negotiations, the dispute will be resolved by mutually agreed upon arbitration. The decision of the arbitrator is final unless it is timely appealed to the FAA Administrator, whose decision is not subject to further administrative review and, to the extent permitted by law, is final and binding.

(b) Termination. Under this agreement, either party may terminate this agreement at any time prior to its expiration date, with or without cause, and without incurring any liability or obligation to the terminated party (other than payment of amounts due and owing and performance of obligations accrued, in each case on or prior to the termination date) by giving the other party at least 60 calendar days prior written notice of termination. Upon receipt of a notice of termination, the receiving party shall take immediate steps to stop the accrual of any additional obligations, which might require payment. The FAA reserves the right to discontinue use of a procedure via a Notice to Airmen (NOTAM) if it is not maintained. Any one procedure would not affect the agreement as a whole.

(2) All other service providers. Where possible, disputes will be resolved by informal discussion between the parties at branch and subsequent division manager levels. In the event the parties are unable to resolve any disagreement through a formal or informal process, actions listed in chapter 4 paragraph k(1)(b) are directed. Appeals are forwarded to the Director, Flight Standards Service (AFS-1) for resolution. A service provider's certificate or letter of authorization is not subject to revocation.

Appendix A. Figures and Forms

Figure A-1. Annual Audit Schedule

| | | | |
|---|--|--------------------------------------|-------------------|
|  | AVS Quality Management System | QPM # | Revision 0 |
| | | Title: AFS-460 Annual Audit Schedule | Date: |

Fiscal Year: _____

| Branch or Audit and Compliance Program Manager | Audit Title | Objective and Initial Scope | Estimated Audit Date (Quarter) | Team Leader | Sub-Team Leaders (or N/A) |
|--|-------------|-----------------------------|--------------------------------|-------------|---------------------------|
| | | | | | |
| | | | | | |
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Figure A-2. Audit Requirements Checklist Template

**Flight Procedure Implementation & Oversight Branch (AFS-460)
Audit Requirements Checklist**

Checklist Number: _____

| <p>Requirement:</p> <p><i>Insert specific requirement (e.g., FAA Order 8260.52, United States Standard For Required Navigation Performance (RNP) Approach Procedures With Special Aircraft And Aircrew Authorization Required,, , paragraph 1.11.2)</i></p> | | |
|--|-------------------------------------|------------------------------|
| Checklist Questions | Compliance verified? (yes or no) | Evidence and/or Observations |
| 1. | | |
| 2. | | |
| 3. | | |
| 4. | | |
| 5. | | |
| <p>Audit Sampling Methods (where to look and how many to look at, find, discuss or interview)</p> | | |
| <p>Additional Comments (use additional pages as needed)</p> | | |

Figure A-3. Audit Plan Template



AFS-460 Audit Plan

Instructions: Upon completion, the team leader forwards the audit plan to the branch manager for review/approval. After review, the branch manager forwards it to the branch secretary to prepare for internal coordination and submission to the division manager approval/signature.

Audit of

insert title of audit here:(i.e., Alaska Airlines)

Project Number

ADT-FY-xxx-xxx

Requester

insert name of branch manager

Audit Team

insert name of team leader
insert name of OJTI if applicable
insert names of team members

insert name of sub-team leader for each sub-team
insert names of sub-team members

Audit Schedule
(anticipated)

| | |
|--|-------------|
| Project Start Date | insert date |
| Notification memo due to the service provider | insert date |
| On-site audit start date | insert date |
| On-site audit completion date | insert date |
| Estimated project conclusion date (7 calendar days after all data is collected) | insert date |
| Final report due to service provider management (21 calendar days after conclusion date) | insert date |

Objective

The objective is to determine service provider compliance with procedures, requirements and standards with (insert the audit topic).

Scope

The scope describes the purpose and parameters of the audit.

Focus Areas

The focus areas are the specific areas the team will concentrate on to determine service provider compliance. Do not use bullets.

Methodology

Use the following type of sentence (edited appropriately for your audit) to describe the methodology. The audit team will interview the service provider’s management, review records, and observe operations.

Applicable Regulations or Statutes

Insert the appropriate FAA orders, directives, notices, etc. as applicable. Use a bulleted list if there are two or more items.

Audit Dates and Facilities

| | | |
|--|--------------------------|-----------------------------|
| On-Site Audit Locations | Anticipated Dates | Facility |
| | insert dates | insert facility name |
| | | |
| | | |

**Justification for
Audit Locations**

In this section, include a description of the reason(s) for selecting the facilities to be audited. This rationale may include, but is not limited to the following:

- *Specific surveillance items associated with the system or procedure.*
- *Likelihood and severity of incidents or accidents associated with the system or procedure.*
- *Number of incidents or complaints reported (high, medium, low) related to the system or procedure.*

Audit Plan Review and Approval Sign-Off Sheet

Team Leader _____ Date _____
(type the name and routing)

Branch Manager _____ Date _____
(type the name and routing)

Division Manager _____ Date _____
(type the name and routing)

approved **not approved**

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Figure A-4. Audit Notification Template

| | | |
|--|---------------|--|
|  U.S. Department of Transportation Federal Aviation Administration | | |
| | | |
| | | |
| | SAMPLE | 800 Independence Ave., SW. Washington, DC 20591 |

<Insert name, title, company, address, city, state and zip code>

Subject: Audit of <insert appropriate text *i. e. Instrument Flight procedure Development Program*>

Dear Mr. / Ms. (as appropriate)

The Federal Aviation Administration (FAA), Flight Standards Service (AFS), Flight Procedure Implementation and Oversight Branch, AFS-460 personnel will be conducting an audit of <insert company name and what is being audited *i. e. Jeppesen Sanderson Inc.'s Flight Procedure Development Program*>. This audit has been scheduled for <insert dates>, at your company address shown above.

The objective of this audit is to <insert appropriate text *i. e. conduct an analysis of policies and procedures pertaining to the design, development and integration of instrument flight procedures (IFPs), quality assurance, flight validation/verification and maintenance of IFPs*>.

We are requesting copies of the following company information: <insert appropriate text>. This information should be delivered to the Manager, Flight Procedure Implementation and Oversight Branch at <insert address>. We are requesting that this information be received in our office no later than <insert date>.

Standard audit procedures will be used, to include interviews with key personnel, facility inspections, and a review of your company's approved programs and manuals. We would like to schedule an entry interview meeting with your key personnel at <insert time> on <insert date>, at your facility. The purpose of this meeting is to introduce the audit team, review the audit process, and ensure that company personnel are familiar with the FAA's process and regulatory responsibilities. An exit meeting may also be scheduled during this time.

Should you require any further information regarding this upcoming audit, please contact <insert branch manager's name, title, routing>, at phone: <insert phone number or other contact information as appropriate>

Sincerely,

<Insert division manager name, title, routing>

Figure A-5. Pre-Audit Team Briefing Checklist

| | | | |
|---|--|-----------------|---------------|
|  | AVS Quality Management System | OPM # | Revision 0 |
| | Title: AFS-460 Audit Team Leader Checklists | Effective Date: | Page 3 of 6 |

Pre-Audit Team Briefing

| | Yes | No | N/A |
|--|--------------------------|--------------------------|--------------------------|
| 1. Confirm the facilities to be audited | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Confirm dates of the audit | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Confirm audit objective and scope | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Identify timetables for Opening Meeting, Closing Meeting, Team Briefings | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Discuss audit techniques to be deployed | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. Ensure that audit work documents and team folders are complete | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 7. Confirm team members' roles and responsibilities (general/audit) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 8. Discuss how to handle conflict resolution <ul style="list-style-type: none"> • Present issues to team leader • Team leader makes final decision and communicates to all concerned | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 9. Ensure that all team members are aware of the following: <ul style="list-style-type: none"> ▪ Auditor conduct and ethical considerations ▪ Use of due professional care in handling customer-supplied products ▪ Storage and protection of audit materials ▪ Issues of confidentiality ▪ Issues involving conflict of interest | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 10. Discuss professionalism <ul style="list-style-type: none"> • Appropriate dress attire, turn off cell phone (or put on vibrate), and responding to inquiries | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 11. Confirm transportation, lodging, and logistical information | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

| | | | |
|--------------|--|-------|--|
| Team Leader: | | Date: | |
|--------------|--|-------|--|

| | | | | | | |
|-----------------------|---------|--|---|--|-----------|--|
| Audit Project Number: | ADT-FY- | | - | | Facility: | |
|-----------------------|---------|--|---|--|-----------|--|

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Figure A-6. Opening Meeting Checklist

| | | | |
|---|--|-----------------|---------------|
|  | AVS Quality Management System | QPM # | Revision 0 |
| | Title: AFS-460 Audit Team Leader Checklists | Effective Date: | Page 4 of 6 |

Opening Meeting

An opening meeting will be held with the audited party's management or, where appropriate, those responsible for the requirements or procedures to be audited. The team leader is responsible for leading the opening meeting. The purpose of this meeting is for the team leader to accomplish the following:

- | | Yes | No | N/A |
|--|--------------------------|--------------------------|--------------------------|
| 1. Introduce audit team members to the audited party | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. State the audit objective and scope <ul style="list-style-type: none"> • Inform audited party that the scope may be expanded if warranted | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Discuss how the audit will be conducted - Auditors will: <ul style="list-style-type: none"> • Review requirements, records, and interview management; • Observe operational procedures and personnel; and/or • Take notes and gather/document objective evidence | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Inform that findings will be provided verbally at the closing meeting | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Inform that safety critical findings will be elevated immediately to AFS management by the audit team leader and referred to the Formal Compliance Process for tracking and resolution | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. Confirm audit timetables and other logistics: <ul style="list-style-type: none"> • Confirm times and dates of briefings and closing meeting • Ensure that personnel are available to accomplish audit objectives • Ensure a conference room or area with telephone and Internet access is provided for the audit team's use during the audit | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 7. Identify audited party's point(s) of contact | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 8. Inquire about on-site safety, emergency, and security procedures | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

| | | | | |
|--------------|--|--|-------|--|
| Team Leader: | | | Date: | |
|--------------|--|--|-------|--|

| | | | | | | |
|-----------------------|---------|--|---|--|-----------|--|
| Audit Project Number: | ADT-FY- | | - | | Facility: | |
|-----------------------|---------|--|---|--|-----------|--|

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Figure A-7. Closing Meeting Checklist

| | | | |
|---|--|-----------------|---------------|
|  | AVS Quality Management System | QPM # | Revision 0 |
| | Title: AFS-460 Audit Team Leader Checklists | Effective Date: | Page 5 of 6 |

Closing Meeting

A closing meeting, chaired by the team leader, will be held to present the audit findings in such a manner that the audited party understands them. Participants should include the audited party's management and/or those responsible for the audited requirements or procedures.

| | Yes | No | N/A |
|--|--------------------------|--------------------------|--------------------------|
| 1. Extend appreciation to the audited party for their cooperation and assistance | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Reiterate the audit objective and scope | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Describe the verification methods used during the audit | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Review results of the audit: <ul style="list-style-type: none"> • Positive aspects of the audit • Observations and whether they require follow-up • Safety critical, safety compliance issues, and other findings | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Inform final report will be distributed to the division manager <u>within 21</u> calendar-days from the conclusion of the audit <ul style="list-style-type: none"> • If additional information is needed, the team leader will notify <u>the</u> branch manager • The audit is concluded <u>7</u> calendar-days after all data is collected | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. Close out any logistics and security matters | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 7. Provide the audited party with AFS-460 Audit Process Feedback form (AFS-460-001-T01-F3) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

| | | | | |
|--------------|--|--|-------|--|
| Team Leader: | | | Date: | |
|--------------|--|--|-------|--|

| | | | | | | |
|-----------------------|---------|--|---|--|-----------|--|
| Audit Project Number: | ADT-FY- | | - | | Facility: | |
|-----------------------|---------|--|---|--|-----------|--|

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Figure A-8. Audit Process Feedback Form

| | | | |
|---|--|-------|-------------|
|  | AVS Quality Management System | QPM # | Revision |
| | | | 0 |
| Title: AFS-460 Audit Process Feedback Form | | Date: | Page 1 of 2 |

One Way We Measure Our Processes Is Through Your Feedback!

| | | | | | | |
|------------------------------|---------|--|---|--|---------------------|--|
| Audit Project Number: | ADT-FY- | | - | | Audit Dates: | |
| Audited Facility: | | | | | Location: | |

| Ratings: 5=Strongly Agree 4=Agree 3=Neutral 2=Disagree 1=Strongly Disagree N/A=not applicable | | |
|--|---|---|
| PERFORMANCE ITEM Please rate AFS-460's Performance on the following items: | RATING Rate 1 (low) to 5 (high) or N/A | COMMENTS Place any specific comments here. Use additional sheets if necessary. |
| Service Provider was given advance notification of the audit. Please specify number of days prior to the audit that the notice was received. NOTE: If this was an unscheduled audit, enter N/A in the "Rating" column. | ■ | ■ |
| The opening meeting was informative and beneficial. | ■ | ■ |
| The audit objectives and scope were communicated in a clear and concise manner. | ■ | ■ |
| The auditors communicated their requests during the audit clearly and concisely. | ■ | ■ |
| The closing meeting was beneficial and met your expectations. | ■ | ■ |
| The audit team was objective and unbiased during the audit. If not, please explain. | ■ | ■ |
| The audit team members were courteous and respectful. | ■ | ■ |

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| | | | |
|---|--|-------|-------------------|
|  | AVS Quality Management System | QPM # | Revision 0 |
| | Title: AFS-460 Audit Process Feedback Form | Date: | Page 2 of 2 |

| |
|--|
| What aspects of AFS-460's audit would you recommend changing? <input type="text"/> |
| What aspects of AFS-460's audit do you consider most noteworthy? <input type="text"/> |
| Additional Comments: <input type="text"/> |

| | | | |
|--|----------------------|--------|----------------------|
| COMPLETED BY: THIS INFORMATION IS OPTIONAL | | | |
| Name: | <input type="text"/> | Title: | <input type="text"/> |
| Signature: | <input type="text"/> | Date: | <input type="text"/> |
| <p>Please Return the AFS-460 Audit Feedback form to: Manager, Flight Procedure Implementation and Oversight Branch, AFS-460 6500 S. MacArthur Blvd (Registry Bldg #104) Oklahoma City, OK 73125 Fax: (405) 954-5270</p> | | | |

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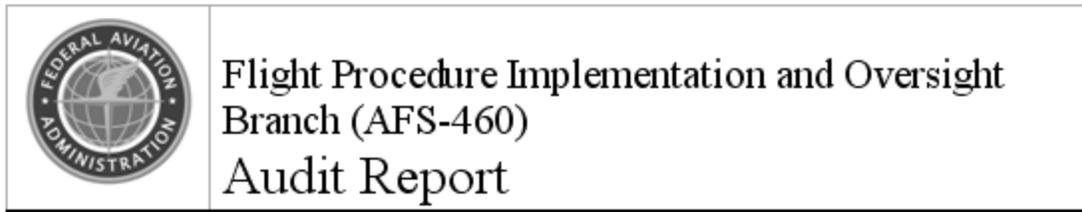
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Figure A-9. AFS-460 Stakeholder Feedback Log

| | A | B | C | D | E | F | G | | |
|----|---------------------|---|-------------------------|----------------------|--|---------------------|--------------------|-----------------|--|
| 1 | |  | | | FLIGHT PROCEDURE IMPLEMENTATION AND OVERSIGHT (AFS-460) Quality Management System | | | | |
| 2 | | | | | | | Rev: Orig | | |
| 3 | | | | | | | | Date: | |
| 4 | | | | | | | | Page ___ of ___ | |
| 5 | | | | | | | | | |
| 6 | Audit Number | Date Initiated | Office Initiated | Date Received | Subject | Reference(s) | Date Closed | | |
| 7 | | | | | | | | | |
| 8 | | | | | | | | | |
| 9 | | | | | | | | | |
| 10 | | | | | | | | | |
| 11 | | | | | | | | | |
| 12 | | | | | | | | | |
| 13 | | | | | | | | | |
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| 19 | | | | | | | | | |
| 20 | | | | | | | | | |
| 21 | | | | | | | | | |

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Figure A-10. Audit Report Template



<Insert Audit Title>
(ADT-FY-XX-YYY)

<Insert Date>

Approval: _____
Manager, Flight Procedure Implementation and
Oversight Branch, AFS-460

Date: _____

I. Executive Summary

Complete Sections II and III of the report before writing the Executive Summary. The Executive Summary should be as brief as possible while touching on the main points of the report noted under the Background, Objective, Scope, Methodology, and Findings headings. After you have written it, read it slowly and critically to make sure that it provides a concise synopsis of the report. Persons reading the Executive Summary should be able to quickly understand the audit and its results. This section should be no more than 1/10 the length of the report.

II. INTRODUCTION

A. Background

<Insert background information>

B. Objective

Flight Procedure Implementation and Oversight Branch (AFS-460) conducted this audit to determine third party service provider compliance with requirement for <insert title or audit purpose.>

C. Scope

<Insert the audit scope (should be the same scope identified on the audit plan)>

The audit was conducted as follows:

Date:

Location:

<i.e., October 5-7, 2010>

<i.e., Boeing/Jeppesen Sanderson, Atlanta, GA>

D. Requirements

The audit team verified the third party service provider's compliance with requirements in the following Federal Aviation Administration (FAA) <indicate source of requirements, e.g., orders, notices, directives, etc>:

- <List requirements in bullet format>

E. Methodology

<Insert the tools and techniques used to conduct the audit.>

III. AUDIT RESULTS

This section provides detailed information for each focus area. It describes all identified audit findings (noncompliance with safety standards or the third party service provider's Safety Management System) and observations.

FOCUS AREA 1: <Insert Focus Area>

a. Description

<Provide a general description of the focus area>

b. Methodology

<Describe specific methodology used during the audit>

c. Requirements

<Describe the processes, procedures and/or specific requirements related>

d. Findings

1. <Provide a detailed description of the noncompliance. Include the safety compliance issue number, if applicable. If there were no instances of noncompliance state "We did not find any noncompliance with requirements relating to this focus area.">
2. <Continue sequential numbering throughout the audit report as necessary, regardless of the focus area. Follow instructions above for each finding.>

e. Observations

1. <Provide a detailed description of the observation or state "There are no observations for this focus area.">
2. <Continue sequential numbering throughout the audit report as necessary, regardless of the focus area.>

APPENDIX A:

Audit Team Members:

<insert name of team members and identify team leader>

APPENDIX B:

Audit Requirements Checklist:

See attachment

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Figure A-11. Audit Report Cover Memo Template

| | | |
|---|---------------|--|
|  U.S. Department of Transportation Federal Aviation Administration | | |
| | | |
| | | |
| | SAMPLE | 800 Independence Ave., SW. Washington, DC 20591 |

<Insert name, title, company, address, city, state and zip code>

Subject: Audit of <insert audit title>

Dear Mr. / Ms. <insert manager name as appropriate>

The Flight Procedure Implementation and Oversight Branch, AFS-460 conducted this audit on <insert date> to determine <insert name of service provider> compliance with requirements for <insert audit title>. <Insert audit scope and focus areas. >

As a result of this audit, the following safety compliance issues were identified.

FORMAL SAFETY COMPLIANCE ISSUES

COMP-FYXX-YY: <Include a brief description of the formal safety compliance issue and state that a Notice of Investigation has been issued on <date>. Continue for each formal safety compliance issue. >

INFORMAL SAFETY COMPLIANCE ISSUES

COMP-FYXX-YY: <Include a brief description of each informal safety compliance issue. Continue for each informal safety compliance issue. Also include a response due date, usually 10 business days after receipt. >

All safety compliance issues will be resolved in accordance with Order FS XXXX.XX, Instrument Flight Procedure Third Party Service Providers Oversight. A response to all informal compliance issues is requested within 21 calendar-days <verify response due date with management> of receipt. The response should include a point of contact and describe the actions the service provider plans on taking to address these issues.

The final audit report is attached, please disseminate as appropriate.

Sincerely,

<Insert branch manager name, title, routing>

Attachment

Figure A-12. Informal Compliance Resolution Flowchart

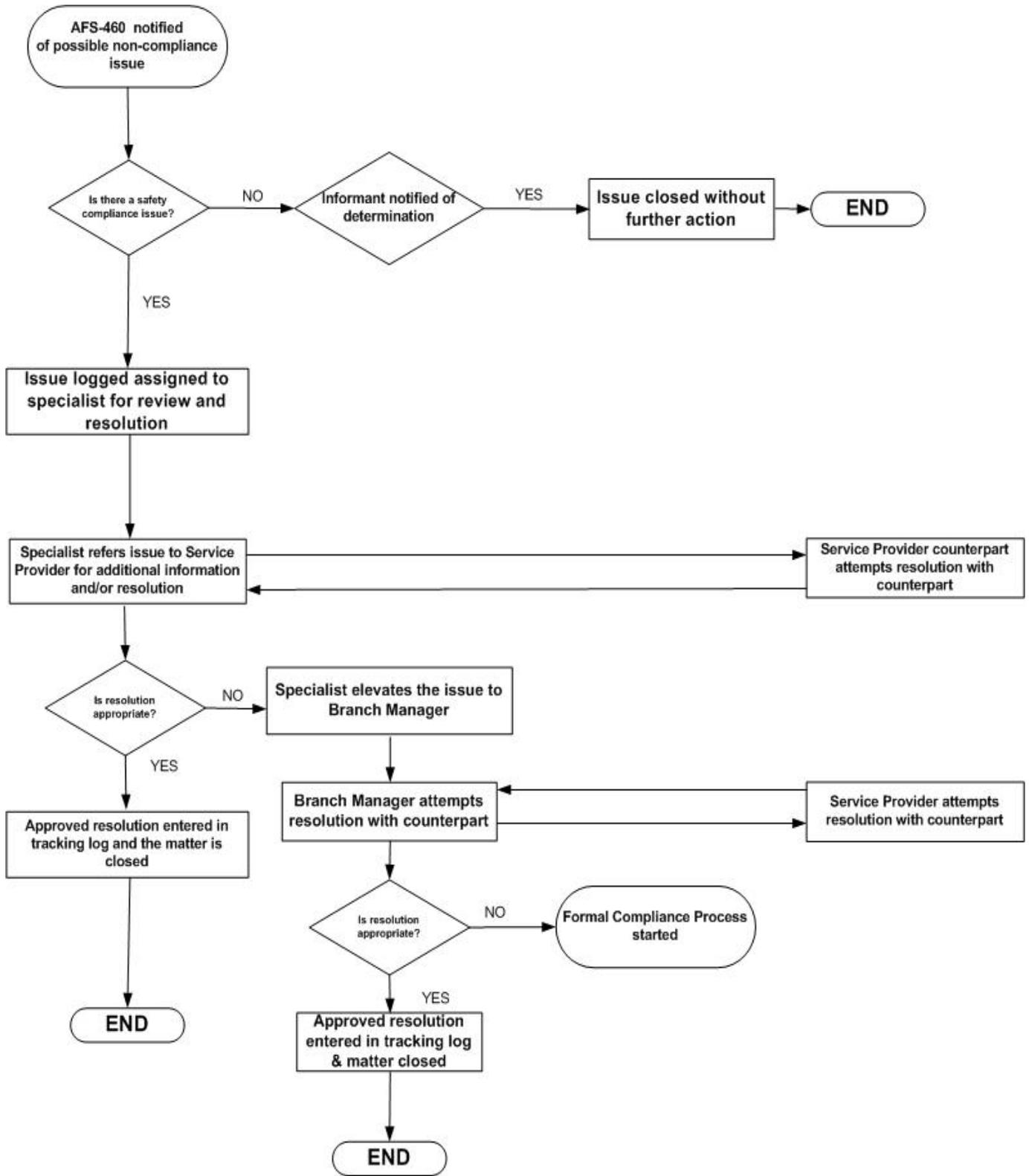


Figure A-13. Request for Additional Information Template

| | | |
|---|---------------|--|
|  <p>U.S. Department of Transportation Federal Aviation Administration</p> | | |
| | | |
| | SAMPLE | |
| | | 800 Independence Ave., SW. Washington, DC 20591 |

<Insert name, title, company, address, city, state and zip code>

Subject: Request for Additional Information, Safety Compliance Issue COMP-FYXX-XX

Note: When initiation of an informal compliance issue did not originate from an audit, the subject of the letter will be noted as Request for Additional Information; Informal Safety Compliance Issue COMP-FYXX-XX.

Dear Mr. / Ms. <insert manager name as appropriate>

If the informal safety compliance issue was found during an audit, the informal compliance procedure will be initiated by the Audit Report Cover Memo prepared in accordance with the audit process as outlined in this order.

This letter initiates the informal compliance procedure by requesting that the service provider submit additional information which will be used to help resolve the safety compliance issue.

Please provide requested information regarding this matter within 21 calendar-days of your receipt of this letter.

Sincerely,

<Insert branch manager name, title, routing>

Figure A-14. Status Update Template

| | | |
|---|---------------|--|
|  <p>U.S. Department of Transportation Federal Aviation Administration</p> | | |
| | | |
| | | |
| | SAMPLE | 800 Independence Ave., SW. Washington, DC 20591 |

<Insert name, title, company, address, city, state and zip code>

Subject: Status Update, Safety Compliance Issue COMP-FYXX-XX

Dear Mr. / Ms. <insert manager name as appropriate>

When the review process will exceed 45 calendar-days of receipt, this letter is used when AFS-460 is still reviewing information received from the service provider and will provide an official response at a later date.

Sincerely,

<Insert branch manager name, title, routing>

Figure A-15. Acceptance of Corrective Actions Template

| | | |
|---|---|--|
|  U.S. Department of Transportation Federal Aviation Administration | | |
| | | |
| | | |
| |  SAMPLE | 800 Independence Ave., SW, Washington, DC 20591 |

<Insert name, title, company, address, city, state and zip code>

Subject: Acceptance of Corrective Actions, Safety Compliance Issue COMP-FYXX-XX

Dear Mr. / Ms. <insert manager name as appropriate>

This letter is used when AFS-460 accepts the service providers' corrective action plan and will monitor its implementation. It must be prepared within 45 calendar-days of receipt of service providers response to a request for additional information.

Sincerely,

<Insert branch manager name, title, routing>

Figure A-16. Closure of Safety Compliance Issue Template

| | | |
|---|---------------|--|
|  U.S. Department of Transportation Federal Aviation Administration | | |
| | | |
| | | |
| | | |
| | SAMPLE | 800 Independence Ave., SW. Washington, DC 20591 |

<Insert name, title, company, address, city, state and zip code>

Subject: Closure of Safety Compliance Issue COMP-FYXX-XX

Dear Mr. / Ms. <insert manager name as appropriate>

This letter is used when objective evidence is received and compliance is verified. It is issued as a matter of record indicating that the safety compliance issue is closed

Sincerely,

<Insert branch manager name, title, routing>

Figure A-17. Formal Compliance Flowchart

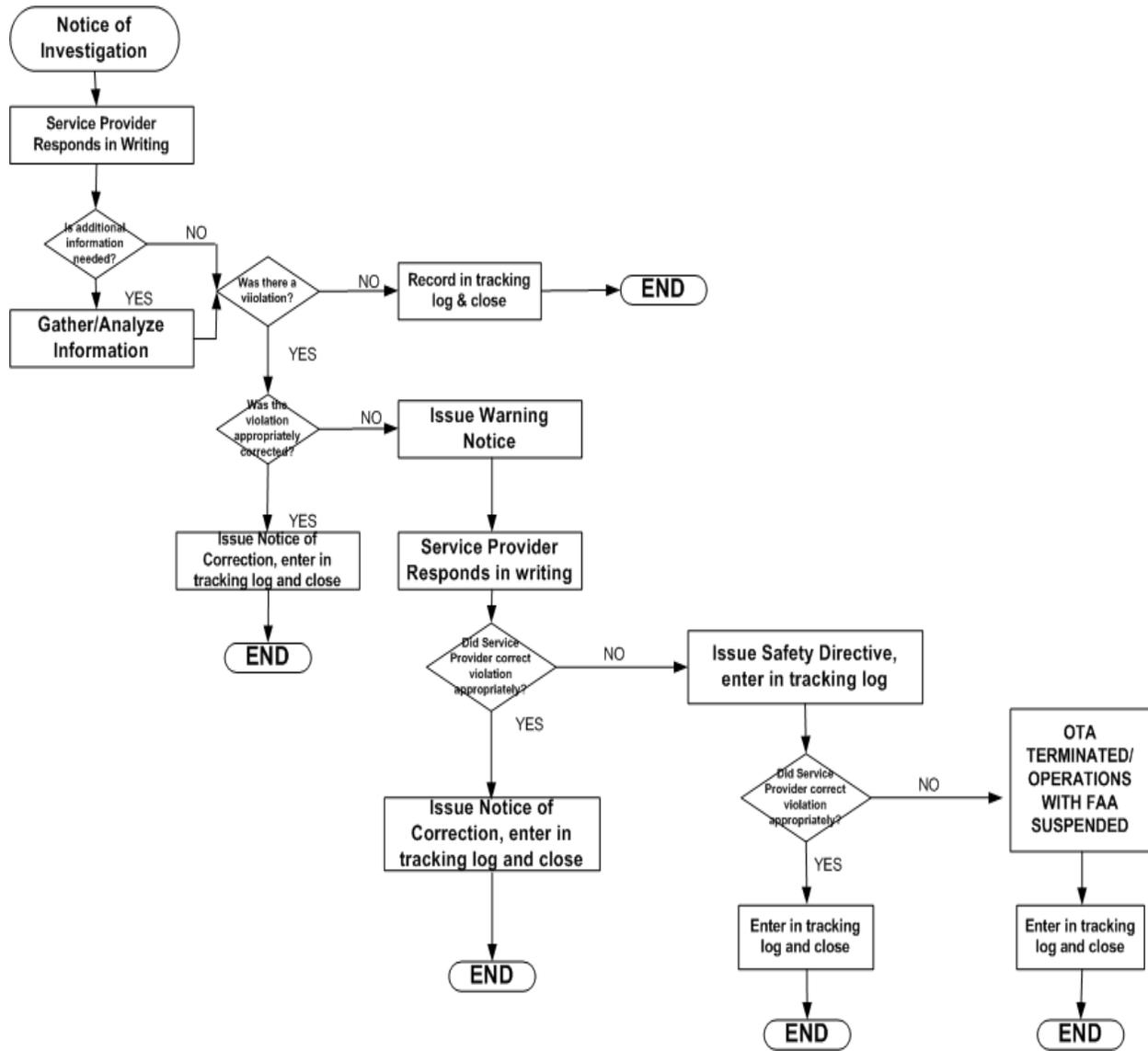


Figure A-18. Compliance Process Notice of Investigation Template



U.S. Department
of Transportation
**Federal Aviation
Administration**

800 Independence Ave., SW.
Washington, DC 20591

SAMPLE

(Insert name, title, company, address, city, state and zip code)

Subject: Notice of Investigation, Safety Compliance Issue Number COMP-FYXX-XX

Dear Mr./Ms. (insert manager name as appropriate)

During our recent audit on (insert date), we were unable to determine (provide a brief description of the safety compliance issue) in accordance with (insert applicable guidance). We believe that your company failed to:

1. (Insert specific non-compliance issues).
2. (Insert applicable guidance).

Since we have not been able to resolve this matter informally with your company, we are commencing formal compliance procedures. Please provide a written response, including any information or statements regarding this matter within 14 calendar days of your receipt of this letter.

Sincerely,

(Insert branch manager name, title, routing)

Figure A-19. Notice of No Action Template

| | | |
|---|---------------|--|
|  <p>U.S. Department of Transportation Federal Aviation Administration</p> | | |
| | | |
| | | |
| | SAMPLE | 800 Independence Ave., SW. Washington, DC 20591 |

<Insert name, title, company, address, city, state and zip code>

Subject: Notice of No Action, Safety Compliance Issue COMP-FYXX-XX

Dear Mr. / Ms. <insert manager name as appropriate>

The Notice of No Action informs the service provider that a noncompliance has not occurred and AFS-460 will document the suspected safety compliance issue as invalid. It is issued as a matter of record indicating that the safety compliance issue is closed.

Sincerely,

<Insert branch manager name, title, routing>

Figure A-20. Compliance Process Notice of Correction Template



U.S. Department
of Transportation
**Federal Aviation
Administration**

800 Independence Ave., SW.
Washington, DC 20591

SAMPLE

(Insert name, title, company, address, city, state and zip code)

Subject: Notice of Correction, Safety Compliance Issue Number COMP-FYXX-XX

Dear Mr./Ms. (insert manager name as appropriate)

The Notice of Investigation issued on (insert date) indicated that your company was not in compliance with the following:

1. (Insert specific non-compliance issue(s), in accordance with (insert applicable guidance).

As a result, your company took the following corrective actions:

1. (Insert corrected non-compliance issue(s), in accordance with (insert applicable guidance).

We have determined that the corrective action(s) listed above are sufficient to correct the non-compliance noted and to prevent future occurrences. This letter will be made a matter of record.

Sincerely,

(Insert branch manager name, title, routing)

Figure A-21. Compliance Process Warning Notice Template



U.S. Department
of Transportation
**Federal Aviation
Administration**

800 Independence Ave., SW.
Washington, DC 20591

SAMPLE

(Insert name, title, company, address, city, state and zip code)

Subject: Warning Notice, Safety Compliance Issue Number COMP-FYXX-XX

Dear Mr./Ms. (insert manager name as appropriate)

An investigation by Flight Procedure Implementation and Oversight Branch, AFS-460 has determined that your company failed to (provide a brief description of the safety compliance issue).

By reason of the foregoing, your company failed to comply with the following:

1. (Insert specific non-compliance issues)
2. (Insert applicable guidance)

To date, your company has failed to take appropriate steps to correct its non-compliance or to provide us any information that leads us to conclude that a safety directive is not warranted. Unless your company takes immediate steps to correct its non-compliance, a safety directive will be issued mandating that:

(Insert service provider name) will suspend utilization of all affected procedures until sufficient evidence is received indicating that the non-compliance issue(s) have been resolved.

Please respond in writing within 14 calendar days of receipt of this notice with the steps your company plans to take to comply with this warning notice or with any other information it would like us to consider in determining whether a safety directive should be issued.

Sincerely,

(Insert branch manager name, title, routing)

Figure A-22. Compliance Process Safety Directive Template



U.S. Department
of Transportation
**Federal Aviation
Administration**

800 Independence Ave., SW.
Washington, DC 20591

SAMPLE

(Insert name, title, company, address, city, state and zip code)

Subject: Safety Directive, Safety Compliance Issue Number COMP-FYXX-XX

Dear Mr./Ms. (insert manager name as appropriate)

By warning notice dated (insert date), your company was notified that it was not in compliance with (insert non-compliance issue) in accordance with (insert applicable guidance).

To date your company has failed to take steps to correct the non-compliance issue(s) or to provide us any information that leads us to conclude that a safety directive is not warranted. Therefore, pursuant to FAA Order FS XXXX.XX, Instrument Flight Procedure Third Party Service Providers Oversight, this safety directive is issued mandating that (insert service provider's name) take the following steps, effective on the date of this directive:

Note: *(For Other Transaction Agreement (OTA) third party service providers)* OTA (insert number) dated (insert date) is hereby terminated. Please take immediate action to cease any additional obligations.

Note: *(For all other service providers)* Cease further development of Instrument Flight Procedure (IFP) operations with the FAA and/or issue a Notice to Airmen (NOTAM) for (list applicable procedure(s)) until sufficient evidence is received indicating that the non-compliance issue(s) have been resolved.

Please provide a written confirmation that your company has taken the steps outlined above within 7 calendar days. Expect an audit of your facility within 90 calendar days *(For all other service providers)*.

Sincerely,

(Insert branch manager name and title)

_____ Date _____
(Insert division manager name and title)
 Concur **Non-Concur**

_____ Date _____
(Insert AFS-1 Director name and title)
 Concur **Non Concur**

Figure A-23. AFS-460 Compliance Process Stakeholder Feedback Form

| | | | |
|---|--|-------|---------------|
|  | AVS Quality Management System | OPM # | Revision 0 |
| | Title: AFS-460 Compliance Process Stakeholder Feedback | Date: | Page 1 of 1 |

Instructions: Upon closure of an informal or formal compliance issue, attach this form to Closure of Safety Compliance Issue or Notice of Correction correspondence and send it to the third party provider's point-of-contact (POC) for the purpose of soliciting stakeholder feedback. AFS-460 will analyze this feedback and identify any trends and/or issues with stakeholder satisfaction and implement necessary action to ensure that stakeholder requirements are continually met and that AFS-460 continues to improve the effectiveness of its Quality Management System.

| | |
|---------------------------------------|---|
| Compliance Number: COMP-FY- | Third Party Service Provider Representative: |
|---------------------------------------|---|

| STAKEHOLDER FEEDBACK QUESTIONS | RESPONSE | REASON FOR NEGATIVE RESPONSE |
|--|---|------------------------------|
| 1. Did the correspondence from AFS-460 clearly identify the suspected noncompliance? | Yes <input type="checkbox"/> No <input type="checkbox"/> | |
| 2. Did the information in the correspondence adequately inform you of the required response? | Yes <input type="checkbox"/> No <input type="checkbox"/> | |
| 3. If you requested further information or clarification, did you get a prompt reply? | Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> | |
| 4. Was AFS-460 correspondence clearly written and understandable? | Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> | |
| 5. Were you satisfied with AFS-460's response to your request? | Yes <input type="checkbox"/> No <input type="checkbox"/> | |
| 6. Did the AFS-460 Staff Specialist conduct business in a professional manner? | Yes <input type="checkbox"/> No <input type="checkbox"/> | |

UNCONTROLLED COPY WHEN DOWNLOADED
Check The Master List To Verify That This Is The Correct Revision Before Use

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Appendix B. Administrative Information

1. Distribution. Distribute this order to the branch level in Offices of Airport Safety and Standards, Air Traffic Organization, and AFS in Washington headquarters (HQ), including the Regulatory Support Division at the Mike Monroney Aeronautical Center (MMAC); to branch level in the regional Flight Standards divisions; and to all Flight Standards District Offices (FSDOs).

2. Definitions.

a. Instrument Flight Procedure (IFP). A charted flight path defined by a series of navigation fixes, altitudes and courses provided with lateral and vertical protection from obstacles from the beginning of the path to a point from which a landing can be completed, and if a landing cannot be completed, then continuing on to a position and altitude at which either holding or en route flight can be continued.

b. Safety Management System (SMS). A Safety Management System (as contained in the approved Operations Manual) established and authorized by appropriate IFP Service Provider authority must define the safety policies, processes, and practices for managing all aspects of IFP design.

c. Service Provider. An individual or organization also referred to as a vendor, who develops or intends to develop IFPs.

d. Third Party. For the purpose of this order, is a non-governmental individual or organization that develops or intends to develop IFPs.

3. Related Publications (current editions).

a. FAA Advisory Circular (AC) 90-100, U.S. Terminal and En Route Area Navigation (RNAV) Operations.

b. FAA Advisory Circular (AC) 90-101, Approval Guidance for RNP Procedures with AR.

c. FAA Advisory Circular (AC) 90-105, Approval Guidance for RNP Operations and Barometric Vertical Navigation in the U.S. National Airspace System.

d. FAA Advisory Circular (AC) 90-110, Authorization Guidance for Development of Required Navigation Performance Procedures with Authorization Required by Third Party instrument Flight Procedure Service Providers.

e. FAA Advisory Circular (AC) 90-111, Guidance for the Validation of Software Tools Used in the development of Instrument Flight Procedures by Third Party Service Providers.

f. FAA Order 1050.1, Policies and Procedures for Considering Environmental Impacts.

g. FAA Order 7100.9, Standard Terminal Arrival Program and Procedures.

h. FAA Order 7130.3, Holding Pattern Criteria.

- i. **FAA Order JO 7400.2**, Procedures for Handling Airspace Matters.
 - j. **FAA Order JO 7930.2**, Notices to Airmen.
 - k. **FAA Order 8200.1**, United States Standard Flight Inspection Manual.
 - l. **FAA Order 8260.3**, United States Standard for Terminal Instrument Procedures (TERPS).
 - m. **FAA Order 8260.19**, Flight Procedures and Airspace.
 - n. **FAA Order 8260.26**, Establishing and Scheduling Civil Public-Use Standard Instrument Procedure Effective Dates.
 - o. **FAA Order 8260.42**, United States Standard for Helicopter Area Navigation.
 - p. **FAA Order 8260.43**, Flight Procedures Management Program.
 - q. **FAA Order 8260.44**, Civil Utilization of Area Navigation (RNAV) Departure Procedures.
 - r. **FAA Order 8260.46**, Department Procedure (DP) Program.
 - s. **FAA Order 8260.52**, United States Standard for Required Navigation Performance (RNP) Approach Procedures with Special Aircraft and Aircrew Authorization Required (SAAAR).
 - t. **FAA Order 8260.54**, United States Standard for Area Navigation.
 - u. **FAA Order 8900.1**, Flight Standards Information Management System.
 - v. **RTCA DO-236B**, Minimum Aviation System Performance Standards: Required Navigation Performance for Area Navigation.
- 4. Authority.** The current editions of the following publications provide AFS the authority and/or guidance to provide IFP service provider oversight:
- a. **FAA Order FS 1100.1**, Flight Standards Service Organizational Handbook.
 - b. **FAA Order VS 1100.2**, Managing AVS Delegation Programs.
 - c. **FAA Order VS 8000.367**, Aviation Safety (AVS) Safety Management System Requirements.
 - d. **FAA Order 8000.368**, Flight Standards Service Oversight.
 - e. **FAA Order 8000.369**, Safety Management System Guidance.
 - f. **FAA Order VS 8000.370**, Aviation Safety (AVS) Safety Policy.

- g. FAA Order 8260.19**, Flight Procedures and Airspace.
- h. 14 CFR Part 13**, Investigative and Enforcement Procedures, § 13.3, Investigations (general).
- i. Other Transaction Agreement (OTA)** between the Federal Aviation Administration and third party service providers.

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U.S. Department
of Transportation

**Federal Aviation
Administration**

Directive Feedback Information

Please submit any written comments or recommendations for improving this directive, or suggest new items or subjects to add to it. Also, if you find an error, please tell us about it.

Subject: Order FS OIFPSP, Oversight of Third Party Instrument Flight Procedure Service Providers

To: Directives Management Officer:

(Please Check all appropriate line items.)

An error (procedural or typographical) has been noted in paragraph _____ on page _____.

Recommend paragraph _____ on page _____ be changed as follows: (Attach separate sheet if necessary.)

In a future change to this directive, please include coverage on the following subject: *(briefly describe what you want added.)*

Other Comments:

I would like to discuss the above. Please contact me.

Submitted by: _____

Date: _____

Telephone Number: _____

Routing Symbol: _____