

BORDEREAU DE CIRCULATION

DSA.GEN.FORM.020



Type de document	<input type="checkbox"/> Circulaire	<input type="checkbox"/> Formulaire	<input checked="" type="checkbox"/> Checklist	
Nom du document	PRELIMINARY APPLICATION ASSESSMENT			
Référence	DSA.AIR.CHKL.401			
	Nom	Fonction	Date	Signature
Rédaction	MAZE JEAN ALFRED	CADRE DE SUPERVISION	08/06/2026	
Vérification Op.	NSATA PATRICIA	CHEF DE BUREAU SUIVI NAVIGABILITE ET CERTIFICATION DES AERONEFS	09/06/2026	
Vérification Qualité	TALLA RITCHIE	REFERENT QUALITE	09/06/2026	
Validation	BISSE BELL RAYMOND	DIRECTEUR DE LA SECURITE AERIENNE	12/06/2026	

Historique des modifications				
Indice modification		Date		Motif(s) de la modification
Version	Révision	Issue	Effectivité	
01	00	30/04/2026	Dès approbation	Création initiale

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OPERATOR/ORGANISATION :

VERIFIED BY :

DATE OF VERIFICATION :

SIGNATURE :

Regulatory references: Circular N°2026.004/C/CCAA/DG/DSA relating to the certification of Continuing Airworthiness Management Organisation.

PRELIMINARY APPLICATION ASSESSMENT					
Item No.	Requirement references	Description	Compliance Criteria	Implementation status	Remarks
1.	Point 4.1.1 Circular N°2026.004	Is the preliminary application form CMR.AIR.FORM.401 attached to the preliminary application?		<input type="checkbox"/> S <input type="checkbox"/> NS <input type="checkbox"/> NA	
2.	Point 4.1.1 Circular N°2026.004	Does the preliminary application contain the following information?			
		a) Company name and complete address		<input type="checkbox"/> S <input type="checkbox"/> NS <input type="checkbox"/> NA	
		b) Notarial act of constitution of the organisation		<input type="checkbox"/> S <input type="checkbox"/> NS <input type="checkbox"/> NA	
		c) Arrangements of sites (if more than one site)		<input type="checkbox"/> S <input type="checkbox"/> NS <input type="checkbox"/> NA	

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	d) Terms of approval and scope of work relevant to the application:	<input type="checkbox"/> S <input type="checkbox"/> NS <input type="checkbox"/> NA	
	e) Accountable Manager name and signature	<input type="checkbox"/> S <input type="checkbox"/> NS <input type="checkbox"/> NA	
	f) Date on which the applicant wishes to begin their activities	<input type="checkbox"/> S <input type="checkbox"/> NS <input type="checkbox"/> NA	

Observations/Resume :

Decision	<input type="checkbox"/> Accepted <input type="checkbox"/> Rejected
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