



National Aviation Authority (Name)

(State)

SAFA

Ramp Inspection Report

¹ No: _____

² Source: RI

³ Date: _____

⁴ Place: _____

⁵ Local time: ____:____

⁶ Operator: _____

⁷ AOC number: _____

⁸ State: _____

⁹ Route: from _____

¹⁰ Flight number: _____

¹¹ Route: to _____

¹² Flight number: _____

¹³ Chartered by Operator* ____

¹⁴ Charterer's State: _____

* (where applicable)

¹⁵ Aircraft Type _____

¹⁶ Registration mark _____

¹⁷ Construction number _____

¹⁸ Flight crew: State of licensing: _____

¹⁹ Remarks:

Code / Std / Remark

____ —
____ —
____ —
____ —

²⁰ Action taken:

.....
.....
.....

²¹ Inspectors' names:

This report represents an indication of what was found on this occasion and must not be construed as a determination that the aircraft is fit for the intended flight.

²² National Coordinator's name

²³ Signature

National Aviation Authority (Name)

(State)

Item	Checked	Remark
A.Flight Deck		
General		
1. General condition	1 <input type="checkbox"/>	1 <input type="checkbox"/>
2. Emergency exit	2 <input type="checkbox"/>	2 <input type="checkbox"/>
3. Equipment	3 <input type="checkbox"/>	3 <input type="checkbox"/>
Documentation		
4. Manuals	4 <input type="checkbox"/>	4 <input type="checkbox"/>
5. Checklists	5 <input type="checkbox"/>	5 <input type="checkbox"/>
6. Radio navigation charts	6 <input type="checkbox"/>	6 <input type="checkbox"/>
7. Minimum equipment list	7 <input type="checkbox"/>	7 <input type="checkbox"/>
8. Certificate of registration	8 <input type="checkbox"/>	8 <input type="checkbox"/>
9. Noise certificate (where applicable)	9 <input type="checkbox"/>	9 <input type="checkbox"/>
10. AOC or equivalent	10 <input type="checkbox"/>	10 <input type="checkbox"/>
11. Radio licence	11 <input type="checkbox"/>	11 <input type="checkbox"/>
12. C of A	12 <input type="checkbox"/>	12 <input type="checkbox"/>
Flight data		
13. Operational flight plan	13 <input type="checkbox"/>	13 <input type="checkbox"/>
14. Load distribution	14 <input type="checkbox"/>	14 <input type="checkbox"/>
Safety Equipment		
15. Hand fire extinguishers	15 <input type="checkbox"/>	15 <input type="checkbox"/>
16. Life jackets / flotation device	16 <input type="checkbox"/>	16 <input type="checkbox"/>
17. Harness	17 <input type="checkbox"/>	17 <input type="checkbox"/>
18. Oxygen equipment	18 <input type="checkbox"/>	18 <input type="checkbox"/>
19. Flash light	19 <input type="checkbox"/>	19 <input type="checkbox"/>
Flight crew		
20. Flight crew	20 <input type="checkbox"/>	20 <input type="checkbox"/>
Journey log book /technical log or equivalent		
21. Journey log book	21 <input type="checkbox"/>	21 <input type="checkbox"/>
22. Maintenance release	22 <input type="checkbox"/>	22 <input type="checkbox"/>
23. Deferred defect rectification	23 <input type="checkbox"/>	23 <input type="checkbox"/>
24. Preflight inspection	24 <input type="checkbox"/>	24 <input type="checkbox"/>

Item	Checked	Remark
B. Safety / Cabin		
1. General internal condition	1 <input type="checkbox"/>	1 <input type="checkbox"/>
2. Cabin attendant's seat	2 <input type="checkbox"/>	2 <input type="checkbox"/>
3. First aid kit / emergency medical kit	3 <input type="checkbox"/>	3 <input type="checkbox"/>
4. Hand fire extinguishers	4 <input type="checkbox"/>	4 <input type="checkbox"/>
5. Life jackets / flotation devices	5 <input type="checkbox"/>	5 <input type="checkbox"/>
6. Seat belts	6 <input type="checkbox"/>	6 <input type="checkbox"/>
7. Emergency exit, lighting and marking, torches	7 <input type="checkbox"/>	7 <input type="checkbox"/>
8. Slides / life-rafts (as required)	8 <input type="checkbox"/>	8 <input type="checkbox"/>
9. Oxygen supply (crew and passengers)	9 <input type="checkbox"/>	9 <input type="checkbox"/>
10. Safety instructions	10 <input type="checkbox"/>	10 <input type="checkbox"/>
11. Sufficient number of cabin crew members	11 <input type="checkbox"/>	11 <input type="checkbox"/>
12. Access to emergency exits	12 <input type="checkbox"/>	12 <input type="checkbox"/>
13. Safety of passenger baggage	13 <input type="checkbox"/>	13 <input type="checkbox"/>
14. Sufficient seat capacity	14 <input type="checkbox"/>	14 <input type="checkbox"/>
C. Aircraft Condition		
1. General external condition	1 <input type="checkbox"/>	1 <input type="checkbox"/>
2. Doors and hatches	2 <input type="checkbox"/>	2 <input type="checkbox"/>
3. Flight controls	3 <input type="checkbox"/>	3 <input type="checkbox"/>
4. Wheels and tyres	4 <input type="checkbox"/>	4 <input type="checkbox"/>
5. Undercarriage	5 <input type="checkbox"/>	5 <input type="checkbox"/>
6. Wheel well	6 <input type="checkbox"/>	6 <input type="checkbox"/>
7. Intake & exhaust nozzle	7 <input type="checkbox"/>	7 <input type="checkbox"/>
8. Fan blades	8 <input type="checkbox"/>	8 <input type="checkbox"/>
9. Propellers	9 <input type="checkbox"/>	9 <input type="checkbox"/>
10. Obvious repairs	10 <input type="checkbox"/>	10 <input type="checkbox"/>
11. Obvious unrepaired damage	11 <input type="checkbox"/>	11 <input type="checkbox"/>
12. Leakage	12 <input type="checkbox"/>	12 <input type="checkbox"/>
D. Cargo		
1. General condition of cargo compartment	1 <input type="checkbox"/>	1 <input type="checkbox"/>
2. Dangerous goods	2 <input type="checkbox"/>	2 <input type="checkbox"/>
3. Security of cargo on board	3 <input type="checkbox"/>	3 <input type="checkbox"/>