

KAAN HAVACILIK SANAYİ VE TİC. A.Ş.



El Kitabı : COMPLIANCE MONITORING MANUAL (CMM)

Revizyon No : 5

Revizyon Tarihi : 24.07.2025



SİVİL HAVACILIK GENEL MÜDÜRLÜĞÜ
DIRECTORATE GENERAL OF CIVIL AVIATION

ONAY SERTİFİKASI
APPROVAL CERTIFICATE

COMPLIANCE MONITORING MANUAL (CMM)

KAAN HAVACILIK SANAYİ VE TİC. A.Ş.

KAAN HAVACILIK

Revision Date : 24.07.2025

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This Compliance Management Manual has been evaluated and inspected in accordance with SHT-UYUMLULUK İZLEME, SHT-CAM and SHT-OPS Instructions and approved by the Turkish DGCA.

Approved By:

Approved By:

Zafer ÇİMEN
Continuing Airworthiness Coordinator

Turgay SENER
Flight Standards Coordinator

Approval Date

08/08/2025



T.C. ULAŞTIRMA VE
ALTYAPI BAKANLIĞI

LIST OF EFFECTIVE PAGES

Section	Revision Number	Revision Date
00.01	4	13.06.2023
00.02	5	24.07.2025
00.04	4	13.06.2023
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04.05	5	24.07.2025
04.06	5	24.07.2025
04.07	2	21.03.2021

REVISION HIGHLIGHTS

Revision No:0

Initial Issue; converted from OM-A-Chapter 3.1.3 and ATO Quality Manual

Revision No:1

00.01 Company Approval, 00.02 Revisions, 01.03 Structure and organization chart of the compliance monitoring function, 02.08 Reporting non-compliance

Revision No:2

00.01 Company Approval, 00.02 Revisions, 00.04 Distribution List, 01.03 Structure and organization chart of the compliance monitoring function, 02.03 Audit Preparation, 02.08 Reporting non-compliance, 03.02 Training, 04.05 APPENDICES

Revision No:3

Related to changing ATO HT name, Training time interval and duration;

00.01 Company Approval, 00.02 Revisions, 00.04 Distribution List, 01.03 Structure and organization chart of the compliance monitoring function, 03.02 Training

Revision No:4

00.01 Company Approval, 00.02 Revisions, 00.04 Distribution System for the Manual, Amendments and Revisions, 01.03 Structure and Organization Chart of the Compliance Monitoring Function, 01.04.01 Accountable Manager, 01.04.02 Compliance Monitoring Manager, 02.01 Auditor(s) Qualification and Man-Hour Planning, 02.05 Collection of Evidence and Analyse, 02.10 Findings Unclosed in a Given Time Frame, 03.02 Training

Revision No:5

00.02 Revision List, 04.05 FLIGHT SAFETY DOCUMENTS SYSTEM (new procedure), 04.06 FLIGHT SAFETY DOCUMENTS SYSTEM (new procedure)

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00-MANUAL ADMINISTRATION AND CONTROL

AMC1 ORO.GEN.200(a)(6)

(00.01)- Company Approval

Revizyon No: 4 Revizyon Tarihi: 13.06.2023

ORO.MLR.100

KAAN AIR has specified the structure of the Compliance Monitoring System, as it is applicable to its operation. Compliance Monitoring System will be structured according to the size and complexity of the operation to be monitored.

The Accountable Manager will have **overall responsibility** for KAAAN AIR compliance management system including Management Review Meetings, twice in every year; January and July.

The Compliance Monitoring policy reflects the achievement and continued compliance with: the official legal regulations and requirements any additional standards specified by KAAAN AIR. **Policy has been reviewed at least twice in a year**, as a mandatory item of Management Review Meeting (YGG).

We undertake the following in the realization and processes of our company's products / services;

1. We consider continuous development, implementation and improvement of strategies for safety, quality, compliance monitoring, customer satisfaction, environment and occupational health / safety as our top priority;
2. In all our processes, safety, customer satisfaction, environmental and occupational health / safety aims to inform the personnel of accidents, serious incidents and dangers which reduce the level of our target and performance, and to support our company's culture of safety, customer satisfaction, environment and occupational health / safety prevention of pollution;
3. Civil aviation rules, human factors and performance limits in the tasks assigned to our employees, to operate in accordance with occupational health and safety;
4. To implement, maintain and improve the safety, quality, compliance monitoring, environment and occupational health / safety management system with appropriate human and financial resources by fulfilling the national / international conditions, standards and civil aviation rules;
5. Ensuring the management system by maintaining safety, quality, compliance monitoring, environment and occupational health / safety practices;
6. Evaluate the integrity of the safety, quality, compliance monitoring, environment and occupational health / safety management system when making strategic decisions.

This manual has been prepared in accordance with the conditions contained in the Air Operator Certificate (AOC) TR-AT-038 and Approved Training Organization (ATO) TR.ATO.015 approved by TR DGCA and with the relevant provisions of SHT-OPS, SHY-6A, EASA Air OPS, SHT-ORA, SHY/SHT-FCL, EASA FCL and SHT-UYUMLULUK regulations.

These procedures are approved by the signee and have to be adhered within all Commercial Air Transport Operations and Training Organizations when applicable.

This manual and procedures reflects the valid policies and procedures of KAAAN AIR. It has been prepared in the English language and has been found approved by the Turkish DGCA.

This Manual is always superseded by TR DGCA regulations. In the event of conflicting statements, TR DGCA regulations apply. Recognized conflicts will be amended with the next revision of this manual.

Istanbul, 13.06.2023

Prepared and Controlled by (s)

Approved by


S. Emrah CANBAZGİL
ATO Head of Training
KAAN Hvac. San. Tic. A.Ş.


Kadir ERDOĞAN
Quality/Comp. Mont. & Safety Mng. Captain
KAAN Hvac. San. Tic. A.Ş.


M. Kemal SÜLER
Accountable Manager, Captain
KAAN Hvac. San. Tic. A.Ş.

(00.02)- Revision List

Revizyon No: 5 Revizyon Tarihi: 24.07.2025
ORO.MLR.100

Record of Revision:

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0	21.01.2019	ALL	Kadir ERDOĞAN
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1.01	12.05.2020	00.02 Revisions 00.04 Distribution List 04.05 APPENDICES	Kadir ERDOĞAN
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(00.03)- List of Effective Pages

ORO.MLR.100

(00.04)- Distribution System for the Manual, Amendments and Revisions

Revizyon No: 4 Revizyon Tarihi: 13.06.2023
ORO.MLR.100

Copy No	Distribution	Format
Original	TR DGCA	PDF
1	Compliance Monitoring & Safety Manager	Paper copy
2	Accountable Manager	PDF
3	Flight Operations Manager	PDF
4	ATO Head of Training	Paper copy
5	Training Manager	PDF
6	Ground Operations / Security Manager	PDF
7	CAMO Manager	PDF
8	Administrative Chief	PDF
9	Offshore BASEs (Each)	Paper copy

CMM shall be distributed to all personnel when it issued and/or revised after approval it within 15 days after approval. All personnel can access to CMM at KAA AIR 's <https://kaanair-depo.online/MANUALS/OPERATIONS/> . Compliance Monitoring Manager is responsible for distribution to all operations personnel via e-mail ucus@kaanair.com as an approved PDF copy.

All personnel can make a request copy of approved CMM from Compliance Monitoring Manager when operation personnel outside of main base. CMM shall be distributed with TR DGCA Approval Certificate in the 2nd page after cover. All personnel shall look at the latest approval certificate before using the manual.

(00.05)- Definition, Abbreviation and Terminology

Revizyon No: 0 Revizyon Tarihi: 21.01.2019

AMC1 ORO.GEN.200(a)(6) / SHT-UYUMLULUK İZLEME Madde 8

(1) Definitions of the terms:

Accountable Manager: The manager responsible for ensuring that all operations and maintenance activities of the operator are in accordance with the standards required by TR DGCA, with full responsibility for TR DGCA within the scope of the relevant legislation and with authority to access, supervise and instruct all units required by the civil aviation regulations within the company; the general manager , or a people directly connected to general manager of the company, which is equipped with financial authority,

Audit: Systematic, independent and documented process in which the business activities and the procured / contracted work and transactions are carried out in accordance with the relevant legislation and standards, as a result of objectively evaluating the records and the evidence obtained,

Auditor: A person who has sufficient experience or vocational training in the field of audit appointed by the compliance monitoring manager, is employed full time in the compliance monitoring unit or is employed in other units of the business and is part time in the compliance monitoring program and does not have administrative responsibility for the audit the person assigned from outside the enterprise,

Compliance Monitoring Function: Systematically monitoring and periodically monitoring and reporting compliance with the applicable national / international legislation and internal procedures of the activities carried out and the products / processes procured / contracted, the measures taken or to be taken to rectify the identified nonconformities and the adequacy of corrective actions processes, trainings and competences necessary for the evaluation and follow-up of the management system, and the whole of the processes carried out as a basic function of the Management System,

Compliance Monitoring Manager: assigned by the accountable manager for the operation of compliance monitoring function and approved in accordance with training, knowledge and experience designated by TR DGCA, managerial staff who are directly responsible for the management of the situation and who do not have administrative responsibilities in other functional units of the company,

Compliance Monitoring Program: It is the most basic component of compliance monitoring function. The program, established for the purpose of monitoring and determining whether the activities carried out or not in accordance with the relevant legislation and standards,

Control: an independent, documented process in which operational activities and procured / contracted products and services are verified by measuring and testing whether conformity with requirements and standards is judged by objective observations,

Document Control: A document management activity which is to implement controlled processes for the creation / monitoring, review, modification, publication, distribution, accessibility, archiving and removal of documents required for business activities,

Management Review: Meetings held at the head of Accountable Manager, where all the compliance monitoring activities are reported and monitored by the management personnel,

Management System: consisting of the compliance monitoring function and the Safety Management System, structured in accordance with the size and complexity of the business operation structure and the activities carried out to ensure that the activities in accordance with the relevant legislation and the specified standards and in a safe manner, directly connected Accountable Manager.

Safety Management System: The organization of the safety management system to ensure that all dangerous and hazardous elements that arise or may arise from the operating or planned activities are reduced to an acceptable safety level and that safety culture and just culture are ensured in order to ensure safety in a coordinated and healthy manner, procedures, education and policy, the system implemented within the management system,

(2) Abbreviations:

AMC, Acceptable Means of Compliance

ATO, Approved Training Organization

CPAR / DÖFİ, Corrective and Preventive Action Request Form / Düzeltici Önleyici Faaliyet İstek Formu (TR)

EASA: European Aviation Safety Agency

FCL, Flight Crew Licensing

General Directorate: General Directorate of Civil Aviation, **TR DGCA**

GM, Guidance Material

ISO, International Organization of Standardization

OPS, Operations

ORA, Organization Requirements for Aircrew
SHGM, Sivil Havacılık Genel Müdürlüğü / **TR DGCA**
SHT, Sivil Havacılık Talimatı / Civil Aviation Directive
SHT-ORA: Flight Team Organization Requirements Guideline,
SHT-UYUMLULUK: Instruction on Compliance Monitoring Function Implementation.
SHY-6A: Regulation on Commercial Air Transportation Operations
SMS, Safety Management System
YGG, Yönetim Gözden Geçirmesi / Management Review Meeting

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01.04.03-Unit Managers
01.04.04-Company Personnel
01.04.05-Auditor(s)

01-ORGANIZATION, DUTIES AND RESPONSIBILITIES

AMC1 ORO.GEN.200(a)(6) / SHT-UYUMLULUK İZLEME Madde 6 / SHT-UYUMLULUK İZLEME Madde 7

(01.01)- General Description of the Company indicating the Structure, Types and Scope of Operations carried out

Revizyon No: 0 Revizyon Tarihi: 21.01.2019

SHT-UYUMLULUK İZLEME Madde 5

Kaan Air is a Turkish aviation company with AOC Air Taxi operator, ATO approved training organization and CAMO. It was established in 1998. Its main activity is air taxi, flight training activities and maintenance activities in aircraft types of fleet.

KAAN AIR;

is the abbreviated version of the company KAAN HAVACILIK SANAYİ ve TİCARET A.Ş. and address is:

Ayazaga Mah. 208. Sok. No: 1 Sarıyer / İSTANBUL - TURKEY

Tel/Operator : +90 532 111 99 93

Fax : +90 216 425 17 03

E-mail : info@kaanair.com

(01.02)- Expression of Compliance with National / International Regulations and Standards

Revizyon No: 0 Revizyon Tarihi: 21.01.2019

SHT-UYUMLULUK İZLEME Madde 5

(a) Preamble

- KAAN AIR will be established and operated effectively in order to systematically monitor the compliance of the activities carried out with the relevant national / international legislation and internal procedures.
- The Accountable Manager is responsible for implementation all regulatory compliance with KAAN AIR's documentation system. He/she ensures that all procedures are established in accordance with applicable regulations and applied to the operations activities by hand of nominated post holder of operations. He/she ensures that regulatory compliance by executing the management system. In the case of any regulatory changing, the Accountable Manager will give directive to managers for compliance of regulations.

(b) Quality Assurance Responsibilities for Sub-Contractors

- KAAN AIR may decide to sub-contract out certain activities to external agencies for the provision of services related to areas such as:
 1. Maintenance;
 2. Ground handling;
 3. Flight Support (including Performance calculations, flight planning, navigation database and dispatch);
 4. Training;
 5. Manual preparation.
- The ultimate responsibility for the product or service provided by the sub-contractor always remains with KAAN AIR. A written agreement will exist between KAAN AIR and the sub-contractor clearly defining the safety related services and quality to be provided. The sub contractor's safety related activities relevant to the agreement will be included in KAAN AIR's Quality Assurance Programme.
- KAAN AIR will ensure that the sub-contractor has the necessary authorisation/approval when required and commands the resources and competence necessary to undertake the task. If KAAN AIR requires the sub-contractor to conduct an activity that exceeds the sub contractor's authorisation/approval, KAAN AIR is responsible for ensuring that the sub- contractor's quality assurance takes account of such additional requirements.

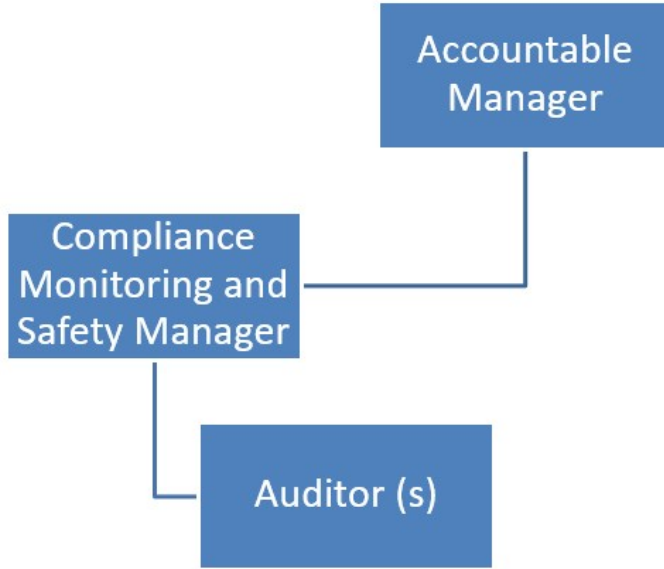
KAAN Air can carry out postal audits to sub-contractor, but can also do **audit on-site** for them if they are **related by offshore duties**.

(01.03)- Structure and Organization Chart of the Compliance Monitoring Function

Revizyon No: 4 Revizyon Tarihi: 13.06.2023

SHT-UYUMLULUK İZLEME Madde 6

(1) Accountable Manager has appointed a Compliance Monitoring Manager to be **directly connected** to himself, responsible for the compliance monitoring function that must be established within the management system.



Organization responsible Post Holder and Deputies table; including names and contact information is in the Appendix 01.03.

01.04-Duties and Responsibilities

SHT-UYUMLULUK İZLEME Madde 7

(01.04.01)- Accountable Manager

Revizyon No: 4 Revizyon Tarihi: 13.06.2023

SHT-UYUMLULUK İZLEME Madde 7-(1)

He/she is responsible and has duties :

- **the ultimate responsibility** for the implementation and maintenance of the compliance monitoring function within the management system,
- **gives the authority to Compliance Monitoring Manager** to access and audit all relevant units and sites in order to ensure that the business activities are carried out in accordance with the relevant legislation and standards,
- **provide the source** needed for the implementation of correction and corrective / preventive actions and apply the required sanctions,
- authorize the compliance monitoring manager to **ensure** that the corrective and corrective / preventive actions taken by the **unit managers** for the units and processes for which they are responsible to carried out in accordance with the relevant legislation and standards,
- **evaluates periodically** whether the compliance monitoring function is actively executed through the management evaluation process.

(01.04.02)- Compliance Monitoring Manager

Revizyon No: 4 Revizyon Tarihi: 13.06.2023

SHT-UYUMLULUK İZLEME Madde 7-(2)

He/she is responsible and has duties :

- for the effective operation of the compliance monitoring function. In this context, authorized by accountable manager, is responsible for the preparation of the necessary document infrastructure, manuals and procedures,
- for the creation, effective implementation, continual review and improvement of the **compliance monitoring program**,
- reports audit findings to accountable manager to ensure that the reported non-compliances and corrective and corrective / preventive actions to be taken for the findings detected in the audits and controls are effectively carried out, creates a **feedback process** for this and defines it in **this** manual,
- to evaluate whether the correction and corrective / preventive activities prepared for the elimination of the findings and reported nonconformities in the audits and controls are sufficient and whether these activities are carried out within the determined period. For this, the corrective / preventive action creates the **follow-up process** and defines it in **this** manual,
- to ensure that the reporting period and the documents to be used for reporting the observed and detected nonconformities to the compliance monitoring manager are established and all operational personnel concerned are informed,
- for the planning of the **management review process** and the **training processes** covered by the compliance monitoring function, implementation in the company and definition in **this** manual.

(01.04.03)- Unit Managers

Revizyon No: 0 Revizyon Tarihi: 21.01.2019

SHT-UYUMLULUK İZLEME Madde 7-(3)

- Responsible activities of the unit and the processes in force in the relevant legislation and in accordance with standards.
- It will be responsible for the determination of the reported nonconformities, corrective and corrective / preventive actions for the findings detected in the audits and controls, and for timely fulfillment.

(01.04.04)- Company Personnel

- All company personnel are responsible for reporting observed and identified nonconformities to the compliance monitoring manager.

(01.04.05)- Auditor(s)

- **The auditor** is responsible with the compliance monitoring manager, as the control form to be used in the audit is sufficient and up-to-date so that the relevant audit site can be effectively audited.

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02-COMPLIANCE MONITORING PROGRAM

AMC1 ORO.GEN.200(a)(6) / SHT-UYUMLULUK İZLEME Madde 9

(02.01)- Auditor(s) Qualification and Man-Hour Planning

Revizyon No: 4 Revizyon Tarihi: 13.06.2023

SHT-UYUMLULUK İZLEME Madde 9-(6) / SHT-UYUMLULUK İZLEME Madde 9-(7) / SHT-UYUMLULUK İZLEME Madde 9-(8) / SHT-UYUMLULUK İZLEME Madde 9-(9)

(1) Auditors may be employed in the compliance monitoring unit on a **full-time basis**, or as **part-time** auditors in other units. Auditors **cannot perform audit duties in areas within their administrative responsibilities**.

(2) A man-hour plan shall be prepared for the purpose of determining and evaluating the adequacy of the auditors who are able to carry out the audit and control activities in the audit areas determined by the audit plan.

(3) Auditor training and experience requirements and additional training and qualifications required for each audit site established in **03.02 Training** subchapter. In addition, the auditors and subjects for which the persons appointed as auditors are authorized are identified. SQF-39 Auditor Assessment and Authorization Form sample is at the Appendix 02.01.b.

(4) Perform audits on certain sites by **auditors provided by an outside source** acceptable to TR DGCA by businesses that are not allowed to appoint an auditor from their organization due to their size and structure, or for reasons other than this (eg. for efficient audits). In the case of using external auditors;

The auditor's knowledge, experience and training requirements for compliance monitoring and the relevant audit site shall be determined and valid documents shall be maintained showing that these requirements have been fulfilled as below:

(a) KAA AIR will decide, depending on the complexity of the operation, whether to make use of a dedicated audit team or a single auditor. In any event, the auditor or audit team will have relevant operational and/or maintenance experience. The responsibilities of the auditors will be clearly defined in the relevant documentation.

(b) The auditors shall have **minimum 2 year experience in civil aviation environment** and should be attended **minimum one audit as assistant auditor** in accordance with performance, current experience and knowledge of the candidate.

(c) The trainings will be **refreshed for each two year** except for the followings:

- If the auditor has performed minimum one audit in the previous 12 months then internal auditing techniques considered as refreshed,
- If the relevant legislation has not amended in the previous two years then training is not necessary.

(d) These inspections shall be carried out under the responsibility of the compliance monitoring manager.

(e) It is the responsibility of the compliance monitoring unit to ensure that corrective and preventive actions are implemented in a timely and effective manner to eliminate the findings of such inspections.

(5) Quality Assurance Programme will identify the persons within the company who have the experience, responsibility and authority to:

- Perform quality inspections, and to perform audits, as part of ongoing Quality Assurance,
- Identify and record any concerns or findings, and the evidence necessary to substantiate such issues (i.e., concerns, findings, observations, and hazards),
- Initiate or recommend solutions to concerns or findings through designated reporting channels,
- Verify the implementation of solutions within specific timescales,
- Report directly to the Compliance Monitoring Manager.

(02.02)- Audit Planning

Revizyon No: 0 Revizyon Tarihi: 21.01.2019

SHT-UYUMLULUK İZLEME Madde 9-(13) / SHT-UYUMLULUK İZLEME Madde 9-(2)

(1) In the context of the compliance monitoring program, the compliance monitoring manager prepares an audit plan in

which the audits and controls to be carried out within the information of the accountable manager and covering **at least one year period** are scheduled.

(2) The audit plan is flexible and is amenable to revisions based on organizational or operational changes in operations, technological developments, supplier changes and regulatory rules and standards, as well as the addition of unplanned / unannounced surveillance and follow-up audits, if deemed necessary. In the course of scheduling the scheduled audits, the management of the concerned units is agreed and **a notice of auditing is made within a reasonable time**.

(3) For scheduled inspections, the appropriate schedule should be **re-scheduled** within a period **not exceeding 3 months**. The audit can be **postponed** or canceled indefinitely, in exceptional cases, such as cancellation of the agreement with the planned supplier, dismissal of the period to be audited or removal from the scope, and disaster such as war affecting the inspection area. The revision of the audit plan is carried out within the knowledge of the accountable manager and information is provided **by e-mail within the scope of the activity reports** carried out at TR DGCA **over a period of 3 months**.

(4) Operational oversight may be increased for any reason. For each audit site, the audit frequency can **not exceed a time span of more than 24 months**. However, if there is an opportunity to access the findings and corrective / preventive activities in the audits of the inspections carried out by the inspections carried out by the international independent audit organizations, which are the members of the business, or by the pools established by the enterprises licensed by TR DGCA and receiving services from the same supplier in supplier inspections, it is not compulsory for the entity to conduct an audit.

(5) The control forms to be used in the audit will be kept up to date in accordance with the content and scope to be able to effectively question the operating activities, in accordance with the regulatory rules and the changes in the operating procedures.

(6) The minimum and basic control and control issues of the compliance monitoring program are listed below;

- Operational authority, exemptions and limits of the operator
- Flight operation activities
- De-icing and prevention on the ground
- Flight support services
- Load control
- Manuals, logs and records
- Management system procedures and manual
- Training standards
- Maintenance and technical standards

(7) Compliance with procedures and procedures established by the operator for purposes of ensuring that all operations are carried out safely, that aircraft are capable of maintaining their flightability, and that all equipment and equipment used remains in serviceable condition. For this, at least supervision and controls are carried out for those that are operating under the following conditions;

- Operational procedures
- Flight safety procedures
- Operational control and surveillance
- Aircraft performance
- The supplied performance data or software
- Flight activities in all weather conditions
- Communication and navigation equipment and applications
- Aircraft mass, balance and loading
- Supplied air mass / balance calculation service and software
- Instruments and safety equipment
- Ground operations
- Flight and flight duty limits, rest requirements and planning
- Aircraft maintenance / operation relationship
- Use of MEL
- Flight team
- Cabin crew
- Hazardous items
- Safety
- Products and services provided by electronic navigational data suppliers

- Aircraft rental and code sharing operations

(02.03)- Audit Preperation

Revizyon No: 2 Revizyon Tarihi: 21.03.2021
SHT-UYUMLULUK İZLEME Madde 9-(3)

The audits will include at least the following steps;

(a) Announcement of audit content:

I- Beginning

An audit will be conducted with the stated content and frequency in accordance with the compliance monitoring program of the audit schedule (**SQF-03 Quality Audit Plan**).

(b) Planning and preparation:

II- Preparation

Prior to commencing auditing, the preparation phase includes:

1. The Compliance Monitoring Manager will publish a calendar (**SQF-03 Quality Audit Plan**) containing the areas to be audited and assigned auditors,
2. The auditors will specify the checklists specified for the areas to be audited (**SQF-32, 33, 34 and substitutes**). The checklists will be prepared in accordance with national and international legislation.
3. The following will be determined by the appointed auditor:
 - a) Where and when the audit will be made,
 - b) Estimated time for all activities,
 - c) The schedule of the meeting to be held with the auditees,
 - d) Date the report was published.
 - e) The language of the audit report will be Turkish and/or English, and the language of the interviews will be Turkish and/or English.

(02.04)- Audit Execution

Revizyon No: 0 Revizyon Tarihi: 21.01.2019
SHT-UYUMLULUK İZLEME Madde 9

III - Execution

(a) Pre-audit meeting

If needed, the auditor and the relevant units to be audited will hold a meeting before reasonable time in advance of how the auditor will be made, depending on the situation. Thanks to this meeting, collected information will be communicated and supervised / audited at the maximum level in auditing.

(b) Opening Meeting

Purposes of the opening meeting:

1. Introducing the audited entity to the supervisor of the supervised entity,
2. A brief summary of the procedures and methods to be used during the audit,
3. Scope and purpose of auditing,
4. Establishment of an official communication environment between supervisors and auditors,
5. To provide the resources and facilities that the supervisory board will need,
6. Determination of the date and time of the closing meeting,
7. Identification of the points of the audit plan that can not be understood.

(c) Personnel interview

1. The publication of published documents,
2. Examination of sample records,

3. Any kind of thing that will lead to the operation being carried out,
4. Protection of obsolete records and documents.

(02.05)- Collection of Evidence and Analyse

Revizyon No: 4 Revizyon Tarihi: 13.06.2023

SHT-UYUMLULUK İZLEME Madde 9

(a) Collection of Evidence and Recording

Evidence will be collected during negotiations, observation of the activities and examination of the documents. Information obtained from interviews; it must also be confirmed by examination of other independent sources, physical observations, measurements and records. In order to better achieve the objectives of the auditor during the audit, if necessary, make changes to the auditor's duties, appointment, audit plan.

(b) Closing Meeting

The audit team will conduct a closing meeting at the end of the audit with the senior management of the team audited at the end of the audit report preparation. The main objective of the meeting is to make observations available to the senior managers of the auditees so that the audit results can be better understood.

(c) Analysis of evidence:

Observations will be documented of all activities being audited during the audit. The audit team may then re-examine these observations to determine which are considered non-conformities.

(02.06)- Reporting

Revizyon No: 0 Revizyon Tarihi: 21.01.2019

SHT-UYUMLULUK İZLEME Madde 9-(14) / SHT-UYUMLULUK İZLEME Madde 9-(16)

IV - Documents

The documentation of the audit consists of the following for the evaluation and preparation of the final report:

1. Checklists (SQF-32A thru -32SY subs and -33) containing Compliance Monitoring system items used by auditors,
2. Any document that supports the evaluator's assessments and which will constitute evidence,
3. At least the following Audit Results Report (SQF-04 Audit Report):
 - o Aim and general information,
 - o Agenda,
 - o The interviewees,
 - o The supervisory team,
 - o Observations-advice,
 - o Findings include relevant corrective actions and deadlines for closing,
 - o Signatures of auditors and auditee.

Audit documentation should be collected so as not to interfere with the need for additional inspection or additional evaluation needs that may arise in the light of information collected during the audit.

V - Completion of Audit

An audit is completed by a report prepared by appointed auditor and Compliance Monitoring Manager (SQF-04 Audit Report).

The report, based on the inspection documents, shall include the following:

1. Observations made during the inspection,
2. Supplementary evidence,
3. A list of findings together with
4. Recommendations for lifting the findings from the center or subsequent monitoring procedures in designated subjects.

(02.07)- Finding Categories, Correction Times and giving Additional Time

Revizyon No: 0 Revizyon Tarihi: 21.01.2019

SHT-UYUMLULUK İZLEME Madde 7-(2)

It will be established this procedure for the discovery of findings, the determination of closing times and, where appropriate, the extension of the periods of operation, in the case of findings found in audits and controls or revealed by nonconformity reports.

(a) FINDING CATEGORIES:

1. **Level 1 Finding:** Incompliance situations where safety standards are reduced when detected and can seriously damage flight safety.
2. **Level 2 Finding:** The situations in which safety standards may be reduced when they are found are potential non-compliance with flight safety.
3. **Observation / Recommendation:** If it does not damage the flight safety when it is determined, but not for the correction, level 2 bullying.

(b) CORRECTION TIMES:

Depend on the categories of findings and are as follows:

1. **For Level 1 Findings:** In the fastest reaction time, the process should be done for a period **not exceeding 10 (ten) days**; it is an urgent task in which relevant activities must be stopped until a successful corrective action is taken.
2. **For Level 2 Findings and Observations / Recommendations:** A compliance period determined by the Compliance Monitoring Manager that **does not exceed 3 (three) months**, depending on the characteristics of the patch. If the findings can not be closed during this period, the operations are stopped by the responsible manager, the compliance monitoring manager and the related department manager.

(02.08)- Reporting Non-Compliances

Revizyon No: 2 Revizyon Tarihi: 21.03.2021

SHT-UYUMLULUK İZLEME Madde 9-(14) / SHT-UYUMLULUK İZLEME Madde 7-(2)

All personnel has to report, observed and detected non-compliance of activities in company and/or supplied products and services from outside providers; to Compliance Monitoring and/or Safety Manager.

SMF-08 "Safety Report" will be used for this purpose. Reports may be prepared via paper or e-mail and reporter can not be put his/her name unless desired. Form can be accesible at <https://kaanair-depo.online/MANUALS/> company intranet.

(02.09)- Corrective/Preventive Action Follow-Up System

Revizyon No: 0 Revizyon Tarihi: 21.01.2019

SHT-UYUMLULUK İZLEME Madde 9-(17)

(a) If it is determined that the activities carried out in the undertaking and / or the products and services supplied do not comply with the relevant regulations and standards, the detected nonconformities shall be reported to the compliance monitoring unit. For this, a reporting system is established in the company, all the necessary personnel are informed about necessary procedures and document infrastructure.

(b) If a noncompliance is found after all audit and compliance monitoring studies, the auditor will identify the evidence, if there is an action to be taken immediately, and will record it in the Follow-up Form (SQF-06 DOFI/CPAR Follow-Up List) and send them to the relevant department manager (SQF-05 DOFI/CPAR Form).

(c) The relevant department is responsible for:

1. Objective evidence and therefore root cause will be analyzed,
2. Define the corrective action steps to ensure that the noncompliance does not occur again,
3. Establish an implementation plan, including timetable to initiate corrective action. In addition, a staff or team should be assigned to coordinate corrective actions.

(d) To ensure corrective action is taken, the Compliance Monitoring system is responsible for:

1. Corrective action plan of action,
2. Implementation and completion of corrective actions,
3. Evaluation of the above issues in an independent evaluation sensitivity,
4. To initiate follow-up supervision in line with the follow-up procedures specified in the plans and / or to perform unplanned inspections.

(e) If a noncompliance is recorded and corrective action is initiated, it will be the only authorized compliance monitoring department in the matter of whether or not the matter has been raised, whether the disease has been turned off within the determined deadline,

(f) The Compliance Monitoring Department will record all the steps performed during the corrective action through the Follow-up Form (SQF-06 DOFI/CPAR Follow-Up List) and bring the results to a report format.

(g) Feedback System :

Corrective / preventive action follow up system is established in order to monitor the corrective and preventive activities prepared by the relevant units in order to overcome the detected findings within the period and effectively.

- The compliance monitoring system will include a feedback system that identifies both the corrective actions and controls that they are properly exploited. Findings detected in the compliance monitoring internal audits and findings detected in the inspections of TR DGCA will be followed up separately in the common pool named SQF-06 Corrective and Preventive Action Follow Up List; similar failures will be avoided repeatedly and the Compliance Monitoring system will be guaranteed to work indefinitely.
- System; it should fully correct the nonconformities and clarify which procedures should be followed if the nonconformities can not be removed within the specified time frame.
- Management must ensure that the compliance monitoring management system that meets the requirements for performing safe and effective flight operations is planned. Accountable Manager should ensure that the company's strategic planning system objectives and main procedures are established and are regularly followed and properly terminated.
- Compliance monitoring department is responsible for keeping track of all departments' purposes and observing them. Accountable Manager will always be informed about the level of access to the objectives through the compliance monitoring reports and the results of the Management Review Meeting MRM (YGG) (SQF-26 YGG and EGGK Report).

(02.10)- Findings Unclosed in a Given Time Frame

Revizyon No: 4 Revizyon Tarihi: 13.06.2023

SHT-UYUMLULUK İZLEME Madde 9-(16)

If the finding, **determined within the scope of compliance monitoring program; can not be closed**, and corrective action can not be performed **within the given time**; the unit manager responsible for closing **may request more time**. In this case, the relevant request will be communicated in writing to the Accountable Manager, if he/she **decide** the request appropriate; **may be given additional time for up to 1 (one) month**.

If the result can not be closed at the end of this time too, the situation is reported to TR DGCA. According to the level of the finding; if it is contrary to flight safety, the manner of action is determined according to the Accountable Manager's assessment. **Also, the situation will be discussed in the Management Review Board meeting.**

(02.11)- Recording System

Revizyon No: 0 Revizyon Tarihi: 21.01.2019

SHT-UYUMLULUK İZLEME Madde 9-(18)

VI - Records

Publication of audit results and distribution:

A report must be issued after each audit, and a copy will be provided to the relevant department manager and Compliance Monitor Manager and a copy will be stored in master file. Periodic reports are prepared by the Compliance Monitoring Manager to be sent to TR DGCA.

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03.01-Management Review

03.02-Training

03-TRAINING AND COMMUNICATION

AMC1 ORO.GEN.200(a)(6)

(03.01)- Management Review

Revizyon No: 0 Revizyon Tarihi: 21.01.2019

SHT-UYUMLULUK İZLEME Madde 10

All of the compliance monitoring function management review meetings are held for the evaluation of the activities, the detected non-conformities and the findings that can not be covered within the following period.

The management review meetings are planned by the compliance monitoring manager to be **at least 2 times a year** (for 6 month periods) and are carried out by Accountable Manager. The attendance of the executive personnel of the functional units of the company is obligatory.

Management reviews are; comprehensive, systematic, documented review by the management of the quality system of operational policies and procedures, and will consider the results of *quality inspections, audits and any other indicators*, and the overall effectiveness of the management organisation in achieving stated objectives.

The issues discussed in the meeting are recorded using the **SQF-26 YGG and EGGK Report form**. Compliance Monitoring Manager is responsible for the announcement of all relevant personnel of the meeting.

During the meeting, the entire compliance monitoring system will be audited, as well as an intensive, profound, systematic, documented evaluation of company policies and procedures, as well as the following:

- Review of quality / compliance monitoring policy of company,
- Decisions taken at the previous meeting,
- The Compliance Monitoring Manager will provide details of the audits carried out, details of the status of the corrective and preventive actions and the analysis of the final points,
- Compliance of legislations,
- The rates of reaching the assessed targets will be explained,
- Compliance Monitoring changes in system administration,
- Compliance Monitoring Manager must communicate customer complaints in coordination with the marketing department,
- Evaluation of subcontractors and suppliers,
- Compliance Monitoring investments,
- The effectiveness of the management system that has achieved the specified standards and targets,
- All new technologies, market strategies and the management of social and environmental conditions that may lead to safe operations.

The following points should be observed during the meeting:

- All decisions taken, the responsible personnel and the agreed durations must be recorded by the Compliance Monitoring Manager,
- Each department must present all training activities in the previous semester,
- Financial source needs should be assessed.

After the meeting, the final result report of the **YGG / EGGK** should be issued and signed by all relevant personnel and units. The report should then be published to ensure that all staff are available. The implementation of all decisions must be monitored by the Compliance Monitoring Manager. In addition, management's evaluation decisions should be followed up periodically by intermediate coordination meetings.

(03.02)- Training

Revizyon No: 4 Revizyon Tarihi: 13.06.2023
SHT-UYUMLULUK İZLEME Madde 11

(1) The personnel working in the **Compliance Monitoring unit and Auditors** shall have received relevant training. These trainings include the following topics at minimum level:

- Quality management system training,
- Internal auditing, **audit techniques**, reporting and recording,
- Compliance Monitoring **Program of the company**,
- **Operation Manuals and procedures of the company**.

(2) The Compliance Monitoring Manager ensures that all operating personnel are trained and informed in an effective, well-planned and **resourced** manner with regard to their compliance monitoring function **responsibility**. **Personnel of the company** and the following **new employees (within 1 month at the latest)** are trained in the following awareness trainings, or compliance monitoring will be provided by a trained instructor:

- Compliance Monitoring / Quality Briefing,
- Company COMPLIANCE MONITORING MANUAL

This training will be **refreshed** in **every year** for all personnel, during **minimum 2 hrs** as a continuation training.

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04.01-Document Creating and Gathering
04.02-Monitoring and Implementing New or Revised Legislation, Regulations and Standards
04.03-Document Publishing, Distribution and Accessibility
04.04-Archiving and Disposal of Decommissioned Documents
04.05-FLIGHT SAFETY DOCUMENTS SYSTEM
04.06-FLIGHT SAFETY DOCUMENTS SYSTEM Groups
04.07-APPENDICES

04-DOCUMENT CONTROL

AMC1 ORO.GEN.200(a)(6) / SHT-UYUMLULUK İZLEME Madde 12

(04.01)- Document Creating and Gathering

Revizyon No: 0 Revizyon Tarihi: 21.01.2019
SHT-UYUMLULUK İZLEME Madde 12

Creation / documentation of documents within the scope of the management system, revision, publication, dissemination, accessibility, archiving, and destruction of documents.

KAAN AIR will maintain accurate, complete, and readily accessible records documenting the results of the quality assurance programme. Records are essential data to enable, analyse and determine **the root causes of nonconformity**, so that areas of non compliance can be identified and addressed.

(04.02)- Monitoring and Implementing New or Revised Legislation, Regulations and Standards

Revizyon No: 0 Revizyon Tarihi: 21.01.2019
SHT-UYUMLULUK İZLEME Madde 9

The intent of CMM, commercial air transport operators and training organizations to monitor compliance with the relevant national / international legislation and operational procedures, as well as the procedures and principles for the implementation of the compliance monitoring function established within the management system.

The size, scope and scope of the activities performed by the a compliance monitoring program is created in accordance with its complexity.

Responsibilities under the compliance monitoring function and the activities carried out will be documented and submitted to the approval of the TR DGCA.

(04.03)- Document Publishing, Distribution and Accessibility

Revizyon No: 0 Revizyon Tarihi: 21.01.2019
SHT-UYUMLULUK İZLEME Madde 12

The compliance monitoring manual submitted to the approval of TR DGCA shall be prepared in such a way that no additional documentation is required for the review and evaluation of TR DGCA, meeting all of the requirements stipulated in SHT-UYUMLULUK.

(04.04)- Archiving and Disposal of Decommissioned Documents

Revizyon No: 0 Revizyon Tarihi: 21.01.2019
SHT-UYUMLULUK İZLEME Madde 12

The records covered by the compliance monitoring function are kept completely and easily accessible. These records are shown if requested by inspections carried out by TR DGCA. The following records are **kept for a period of 5 years**:

1. Audit plans, used control forms and audit reports
2. Non-compliance reports
3. Corrective / preventive action forms and follow-up and results reports
4. Management review records
5. Training records.

(04.05)- FLIGHT SAFETY DOCUMENTS SYSTEM

Revizyon No: 5 Revizyon Tarihi: 24.07.2025

Annex 6 Part I ATTACHMENT D

DESIGN

Flight safety documents system will maintain **consistency** in terminology and in the use of standard terms for common items and actions.

Operational documents will include a **glossary** of terms, **acronyms** and their standard **definition, updated on a regular basis** to ensure access to the most recent terminology. All significant terms, acronyms and abbreviations included in the flight documents system will be defined.

Flight safety documents system will ensure standardization across document types, including writing style, terminology, use of graphics and symbols, and formatting across documents. This includes a **consistent location** of specific types of information, **consistent use of units of measurement** and **consistent use of codes**.

Flight safety documents system will include a **master index to locate**, in a timely manner, information included in more than one operational document.

*Note.— The **master index** must be placed in the front of each document and consist of no more than three levels of indexing. Pages containing **abnormal and emergency** information must be **tabbed for direct access**.*

Flight safety documents system will comply with the requirements of **KAAN AIR's quality system**.

VALIDATION

The flight safety documents system will be **validated before deployment**, under realistic conditions. Validation will involve the critical aspects of the information use, in order to **verify its effectiveness**.

Interactions among all groups that can occur during operations will also be included in the validation process.

DEPLOYMENT

KAAN AIR will **monitor** deployment of the flight safety documents system, to ensure appropriate and realistic use of the documents, based on the characteristics of the operational environment and in a way which is both operationally relevant and beneficial to operational personnel. This monitoring will include a formal **feedback** system for obtaining input from operational personnel.

AMENDMENT

KAAN AIR will develop an **information gathering, review, distribution and revision control system** to process information and data obtained from all sources relevant to the type of operation conducted, including, but not limited to;

- State of KAAAN AIR; TR DGCA / TURKEY,
- State of design; EASA, RUSSIA,
- State of Registry; TR DGCA / TURKEY,
- Manufacturers; Leonardo / ITALY and Kamov / RUSSIA and
- Equipment vendors.

Note.— Manufacturers provide information for the operation of specific aircraft that emphasizes the aircraft systems and procedures under conditions that may not fully match the requirements of KAAAN AIR. KAAAN AIR will ensure that such information meets their specific needs and TR DGCA.

KAAN AIR will develop an information **gathering, review and distribution system** to process information resulting from changes that originate within KAAAN AIR, including:

- a. changes resulting from the **installation of new equipment**;
- b. changes in response to **operating experience**;
- c. changes in **KAAN AIR's policies and procedures**;
- d. changes in **KAAN AIR certificate**; and
- e. changes for purposes of maintaining **cross fleet standardization**.

Note.— KAAAN AIR will ensure that crew coordination philosophy, policies and procedures are specific to its operation.

A flight safety documents system will be **reviewed**:

- a. on a regular basis (at least **once a year**);
- b. after **major events** (mergers, acquisitions, rapid growth, downsizing, etc.);
- c. after **technology changes** (introduction of new equipment); and
- d. after **changes in safety regulations**.

KAAN AIR will **develop methods of communicating** new information. The specific methods will be responsive to the degree of communication urgency.

Note.— As frequent changes diminish the importance of new or modified procedures, it is desirable to minimize changes to the flight safety documents system.

New information will be reviewed and validated considering its effects on the entire flight safety documents system.

The method of communicating new information will be complemented by a **tracking system** to ensure currency by operational personnel.

The tracking system is including the procedure to verify that operational personnel have the most recent updates.

(04.06)- FLIGHT SAFETY DOCUMENTS SYSTEM Groups

Revizyon No: 5 Revizyon Tarihi: 24.07.2025

Annex 6 Part I ATTACHMENT D

ORGANIZATION

Flight safety documents system will be organized according to criteria which ensure easy access to information required for flight and ground operations contained in the various operational documents comprising the system and which facilitate management of the distribution and revision of operational documents.

Information contained in a flight safety documents system will be **grouped** according to the importance and use of the information, as follows:

- a. **Time-critical information**, e.g., information that can **jeopardize the safety of the operation if not immediately available**; (Nav-data charts),
- b. **Time-sensitive information**, e.g., information that can **affect the level of safety or delay the operation if not available in a short time period**; (company personal/authorization papers; license, medical certificate, insurance, training plans),
- c. **Frequently used** information; (Manufacturer documents; RFM, QRH, MEL),

-
- d. **Reference** information, e.g., information that is required for the operation but does not fall under b) or c) above; (TR DGCA/EASA regulations/instructions, company Operation Manuals, standart operation procedures, approved company Forms) and
 - e. Information that can be **grouped based** on the **phase of operation** in which it is used (...).

*Time-critical information will be placed **early and prominently** in the flight safety documents system.*

*Time-critical information, time-sensitive information, and frequently used information will be **placed in cards and quick-reference guides**.*

(04.07)- APPENDICES

Revizyon No: 2 Revizyon Tarihi: 21.03.2021

SHT-UYUMLULUK İZLEME Madde 9-(18)

Appendix 02.01.a ..	SQF-20	Man-Hour Plan
Appendix 02.01.b ..	SQF-39	Auditor Assessment and Authorization Form
Appendix 02.03.a ..	SQF-03	Quality Audit Plan
Appendix 02.03.b ..	SQF-32B1	Air Taxi Operator Compliance Monitoring Audit Checklist
	 SQF-32G1,2,3 ..	Approved Training Organization Audit Checklists
Appendix 02.06	SQF-04	Audit Report
Appendix 02.08	SMF-08	Safety - Hazard Report (Evaluation)
Appendix 02.09.a ..	SQF-05	CPA/DOFI Corrective and Preventive Action Request Form
Appendix 02.09.b ..	SQF-06	CPAR/DOFI Follow-Up List
Appendix 03.01	SQF-26	YGG/EGGK (MRB/SRB) Management Review Meeting Report

Appendix to CMM

(01.03)- Structure and Organization Chart of the Compliance Monitoring Function

SHT-UYUMLULUK İZLEME Madde 6

Revizyon No: 5 Revizyon Tarihi: 15.08.2025

Post Holder	Name SURNAME Mob.Tel & Fax & e-mail	Deputy Name
Accountable Manager	M. Kemal SÜLER Mob: 0530 403 51 51 Fax: 0216 425 17 03 kemal.suler@kaanair.com	Ummihan YILDIZ Mob: 0530 381 21 01 Fax: 0216 425 17 03 ummuhan.yildiz@kaanair.com
Compliance Monitoring and Safety Manager	Kadir ERDOĞAN Mob: 0532 367 25 82 Fax: 0216 425 17 03 kadir.erdogan@kaanair.com	M. Kemal SÜLER
ATO (Approved Training Organization) Head of Training	Tuncay YÜCE Mob: 0533 364 38 51 Fax: 0216 425 17 03 tuncay.yuce@kaanair.com	Kadir ERDOĞAN

	hr	day	we	(45 hr/wk)
INITIAL	8 x 5 + 5 x 1 = 45 hr x 52 we = 2340		52	13.360
HOLIDAYS	8	14	1	* 20 days
SICKNESS / HOSPITAL	8	2	1	if 50+ yrs old
TRAININGS	8	8	1	
NOMINATED OFFICER TRAINER	4	12	1	
PILOTAGE DUTIES				
CONTRACTED AT OUTSIDE AMO				
AVAILABLE HOURS				10.876
SMS - SAFETY MANAGEMENT SYSTEM		per	ea	hr
				1020
QUALITY MANAGEMENT		per	ea	hr
				688
	Regulation, Instructions Evaluations and Distribution	12	1	16
	Manual, Procedures Revision (SHY MOE , EASA MOE)	6	2	64
	Audit Checklists Review	16	4	128
	Quality Management Evaluation	5	8	40
	Quality Trainings	19	2	38
	Quarterly Quality Reports to DGCA	6	4	24
	Been Audited by TR DGCA / EASA (ISO, external companies etc.)	35,5	8	284
	Supervision of the progress of the corrective actions/review	30	1	30
	Regular Meetings	5	8	40
	Personnel Quality Briefing	12	2	24
AUDITS - QUALITY		per	ea	hr
				784
	Internal Audits; (Qua, Safty, FO, TRN, GO, SEC, FL-SELL, HL-SELL, ACC-FNC, ATOX2, HLPRT, ISO)	17	8	136
	SACA Checks	3	4	12
	Operations Sub- contactors Audits (UNIVERSAL, THY-OPET)	3	8	24
	Internal Audits for CAMO; (CAMO x2, Prod-Samples x4)			0
	Internal Audits for SHY - EASA-145; (AMO, MOE x 2, O, Store, PPC, Tool, Comp-Worksh	11	8	88
	Internal Audits for SHY - EASA-145 Products; (Base x 4, Line x 4)	12	8	96
	Internal Audits for Contractors to SHY-EASA-145 (PWC, MyTechnic, Metkal)	7	8	56
	Been Audited- INTERNAL	17	8	136
	Corrective Actions for Authority (TR DGCA, EASA, External) Audits	8,5	8	68
	Follow up and closure of any non-conformance	21	8	168
FLIGHT & TRAINING & GROUND OPERATIONS				1220
ATO (Approved Training Organization)				279
SHY-M DUTIES		Hlk	ea	hr
				877
EASA / SHY-145 DUTIES		per	ea	hr
				432
MAINTENANCE ON TYPE / IN CAPABILITY LIST				134
REQUIRED/ SUB TOTAL				5.900
Deviation (+ 25%)				1.475
	PERCENTAGE REQUIRED + DEVIATION			68%
	PERCENTAGE RESIDUAL			32%
RESIDUAL HOURS				3.501

TECHNIC TEAM - COMPLIANCE ->			AUDITORS ->				TOTAL TOTAL ->	
GÜRBÜZ AÇIKGÖZ C/AM-Dp		KADIR ERDOĞAN	GÖZDE Ü.POLAT	GÜRAY ÜNLÜ	M. KEMAL SÜLER	YEŞİM KORKMAZ		
B.2		QM/QUA	QM/QUA	COMP	ACM	GOM		
C / B1.3		SM	ENG	SMS	GM	SECM		
CS-SS		BASE-M	SAFA	ENG				
3		TRI	COORD					
		PIt			PIt			
Auditor		Auditor	Auditor	Auditor	Auditor	Auditor		
	2.340	2.000	2.340	2.340	2.000	2.340	INITIAL	
	160	160	160	112	160	208	HOLIDAYS	
	16	16	16	16	16	16	SICKNESS / HOSPITAL	
	64	64	64	64	64	64	TRAININGS	
	48	30	48	30	30	48	NOMINATED OFFICER TRAINER	
		400			400		PILOTAGE DUTIES	
	40						CONTRACTED AT OUTSIDE AMO	
Genel Hıcl A.S.								
TOTAL->	2.012	1.330	2.052	2.148	1.330	2.004	AVAILABLE HOURS	
1020	68	238	156	238	160	160	SMS - SAFETY MANAGEMENT SYSTEM	
688	82	100	232	176	72	26	QUALITY MANAGEMENT	
16		8	8					
128	16	16	16	16				
64		64	64	64				
40		8	24	8				
38	2	8	16	8	2	2		
24		4	16	4				
284	64	36	68	68	32	16		
30					30			
40		8	8	8	8	8		
24		12	12					
784	40	160	340	156	16	72	AUDITS - QUALITY	
136		24	32	24	16	40		
12		12						
24		8	8			8		
0								
88	8	16	64					
96		32	64					
56		8	40	8				
136	32	24	32	24		24		
68		12	28	28				
168		24	72	72				
1220	152	104	112	320	364	168	FLIGHT & GROUND OPERATIONS	
279		139			140		ATO (Approved Training Organization)	
877	289	100	246	206	36		SHY-M DUTIES	
432	56	76	236	0	64		EASA / SHY-145 DUTIES	
134	134						MAINTENANCE ON TYPE	
	1.287	917	1.322	1.096	852	426	REQUIRED/ SUB TOTAL	
	322	229	331	274	213	107	Deviation (+ 25%)	
	80%	86%	81%	64%	80%	27%	PERCENTAGE REQUIRED + DEVIATION	
	20%	14%	19%	36%	20%	73%	PERCENTAGE RESIDUAL	
	403	184	400	778	265	1.472	RESIDUAL HOURS	
	GÜRBÜZ AÇIKGÖZ	KADIR ERDOĞAN	GÖZDE ÜNLÜ	GÜRAY ÜNLÜ	M. KEMAL SÜLER	YEŞİM KORKMAZ		

Prepared :	 Kadri ERDOGAN Quality Comp. Mont. & Safety Mng, Captain KAAH HvcI. San. Tic. A.Ş.	Controlled :	 M. Kemal SULER Accountable Manager, Captain KAAH HvcI. San. Tic. A.Ş.
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EASA
AUDITOR AUTHORISATION FORM

Auditor No : 3	Görev / Work : Denetçi / Auditor
Adı Soyadı / Name : Kadir ERDOĞAN	Civil Aviation : 3.06.1999 (23 yrs)
TCK / National ID : 44572054832	İşe Giriş / Employment : 25.02.2014
Cep Tel / Mobile : 0532 367 25 82	Görevl./Auth. Date : 1.01.2015
	Renewal / Yenileme : 10.02.2024 Rev: 03

Working At: (Görev aldığı birim) : Since... : (Çalışma Periyodu)

Will Audit : (Denetleme Yapacağı Birim)

AIR TAXI Accountable Mng Quality Mng X 2015/2 - Current Safety Mng X 2015/2 - Current Flt Ops Mng X Pilot FI Plan Training Mng X 2014/4 - 2015/2 X OPS-N-O X Ground Tr Gro Ops Mng Sub Cont Security Mng Sub Cont Account-Finance Air Taxi Rent Mng HLPRT MNGMT HELI SALE MNGMT	CAMO CAM Engineer Sub Cont SHY-145 MM Prod.Plan Store M CS Heli CS Comp Mech Helper Sub Cont SMS TRTO TRI TRE Ground Inst	AIR TAXI Accountable Mng Quality Mng Safety Mng Flt Ops Mng Pilot FI Plan Training Mng OPS-N-O Ground Tr Gro Ops Mng Sub Cont X POAŞ Security Mng Sub Cont X HAVAŞ Sub Cont X GÖZEN Sub Cont X KOZA Account-Finance Air Taxi Rent Mng HLPRT MNGMT HELI SALE MNGMT	CAMO CAM X Engineer X Sub Cont X SACA Audits X SHY-145 MM X Prod.Plan X Store M X CS Heli X CS Comp X Maint.Car X Quality Sub Cont X SMS X ATO X TRI TRE Ground Inst
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Nitelik ve Yetkinlik Değerlendirmesi & Alınan Eğitimler (Proficiency Assessment & Trainings) :

Air Taksit Accountable Mng Quality Mng X Safety Mng X Flt Ops Mng X Pilot FI Plan SAFA / SANA / SACA X Training Mng X OPS-N-O Ground Tr Gro Ops Mng Sub Cont Security Mng X Account-Finance Air T Rent Mng Heliport Mng X Heli Sale Mng	SİVİL HV ŞİRKET CV SOZLESME SGK KYS-9-14-18 X AUD ISG X SMS X PROSED ERP X OPS3 AIROPS Accident Investi X Type OM-A-B-C 6A50 Ground Hand FCL X NEW TRT X CRMI X DGR Ground Hand DGR X Sec Mngm X Airport Sec X X Güvenlik Plan Hlprt Mngm X İlk Yardım / First Aid X Yangın / Fire Fighting	CAMO CAM Engineer Sub Cont SHY-145 MM Prod.Plan Store M CS Heli CS Comp Mech Helper Sub Cont TRTO TRI TRE Ground Inst	M UNIV CAME X PREF X 145 UNIV Incoming Lisans Type English Human : 145 MOE Relevant : EWIS X FTS Boroskop Structure Sheet Metal Batt Elect Pref Human TRI : Exam Sem :
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Auditor Name / Adı Soyadı : Kadir ERDOĞAN Sign / İmza : Date / Tarih : 9.02.2024	Quality Manager Name / Adı Soyadı : Kadir ERDOĞAN Sign / İmza : Date / Tarih : 9.02.2024	Accountable Manager Name / Adı Soyadı : M. Kemal SÜLER Sign / İmza : Date / Tarih : 9.02.2024
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		Year	202x												AUDITORS									
		Month	1	2	3	4	5	6	7	8	9	10	11	12	MKS	KE	GUP	TY	AMU	YD	NU	A5		
		Management Review Meeting	X						X															
		Safety Action Group Meeting		X			X		X			X												
OPS	1	Quality Dept					X													X				
	2	Safety Management							X											X				
	3	Flight Operations		X														X						
	4	Antalya Offshore Ops			X											X	X	X						
	5-15	SAFA / SANA / SACA		HVK	HKE	HKO	HKP	HKV	HKG	HKU	HKT	HLE	HLF	HLG		X	X		X					
	16	Training Dept			X											X								
	17	Ground Operations				X										X								
	18	ACM Ground Handling					X									X	X							
	19	THY & OPET			**							X									X			
	20	Security System										X					X							
	21	Flight Selling											X			X								
	22	Helicopter Selling			**									X							X			
	23	Account / Finance Dept			**										X	X								
		Un-Planned																						
ATO	24	ATO Trainings					X													X				
	25	ATO Org & Quality & SMS										X								X				
Reliant	26	Heliport			**							X					X			X				
ISO	27	ISO					X										X							
SHY-M	28	CAMO & CAME					X										X							
	29	CAMO Quality System			X																	X		
	30	Product A119		X													X					X		
	31	Product AW109					X										X					X		
	32	Product A139				X											X					X		
	33	Product KAMOV										X					X	X				X		
			Un-Planned																					
SHY-145 / EASA-145	34	Maintenance Organisation (common)		X													X							
	35	Antalya Line Station								X							X	X						
	36	SHY MOE review									X							X						
	37	EASA MOE review										X					X	X						
	38	145 Quality + SMS System (common)							X													X		
	39	Store & Purchasing (common)			**					X								X						
	40	PPC & Engineering (common)			**						X							X						
	41	Tool & Calibration (common)			**							X						X						
	42	Workshop & Component			**								X					X						
	43	Product A119 BASE								X							X	X						
	44	Product AW109 BASE					X										X	X						
	45	Product A139 BASE (common)							X								X	X						
	46	Product Kamov BASE									X						X	X						
	47	Product A119 LINE			X													X						
	48	Product AW109 LINE									X							X						
	49	Product A139 LINE (common)										X						X						
	50	Product Kamov LINE											X					X						
		Un-Planned																						
Contractors	51	Leonardo/Agusta IT (SHY-M & SHY-145 & EASA)			**						X						X							
	52	Pratt & Whitney CA (SHY-M & SHY-145 & EASA)			**							X						X						
	53	MyTechnic TR (SHY-145 & EASA)			**								X				X							
	54	Metkal Calibration TR (SHY-145 & EASA)			**									X				X						
			Aeromaritime-MA (SHY-M & SHY-145)																					
	55	Aero4M SI (SHY-145 & SHY-M)			**						X							X						
56	HELIAVIONICSLAB PT (SHY-145 & SHY-M)												X				X							
			**	Postponed/Extended from preceding year																				

[illegible]

Prepared By:
QUA & COMP.MON.& SAFETY MNG
DATE / SIGNATURE
04/01/2021

Approved By :
ACCOUNTABLE MANAGER
DATE / SIGNATURE
04/01/2021



AIR TAXI OPERATOR COMPLIANCE MONITORING AUDIT CHECKLIST

DATE	AUDITOR (S) Name Surname / Signature	AUDITED RESPONSABLE PERSON Name Surname / Signature
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No	Başlık	Referans	Konu	GD	U	UD	Açıklamalar
KYS-01	GENEL	SHY 6A Md.40 (5)	İşletmecinin, faaliyetlerini ulusal ve uluslararası mevzuatlarda belirlenen standartlara uygunluğunu sağlayacak TSE, ISO veya CEN standartlarında bir kalite güvence sistemi sertifikasına sahip midir?				ISO 9001-14001-18001
KYS-02	GENEL	SHY 6A Md.40 (6)	İşletme Tarifeli seferler ile yolcu ve yük taşımacılığı yapıyor ise IATA IOSA mevcut mudur?				
KYS-03	GENEL	SHY 6A Md.20 (a)	Uyumluluk İzleme Sistem Yöneticisi görevlendirilmiş midir? Yönetici onay belgesi (FORM-4) onaylı mıdır?				FORM-4
KYS-04	GÖREV ve SORUMLULUKLAR	SHT-UYUMLULUK İZLEME Madde 6 (1)	Doğrudan Sorumlu Müdüre bağlı mıdır? İstedğinde Sorumlu Müdüre doğrudan ulaşabiliyor mu?				CMM 1.3
KYS-05	GÖREV ve SORUMLULUKLAR	SHT-UYUMLULUK İZLEME Madde 7 (1)(a)	Sorumlu Müdür, düzeltici işlemlere kaynak sağlanmasını ve gerekli yaptırımların uygulanmasını da içerecek şekilde Uyumluluk İzleme Sistemi için nihai sorumluluğu üstüne almış mıdır?				CMM 1.4.1
KYS-06	GÖREV ve SORUMLULUKLAR	SHT-UYUMLULUK İZLEME Madde 7 (1)	Sorumlu Müdür; ilgili tüm birim ve sahalar erişim denetimlerin yapılması, düzeltici işlemlerin yerine getirilmesinin Uyumluluk İzleme Sistemi Yöneticisi aracılığı ile emin olmak sorumluluğuna sahip midir?				CMM 1.4.1
KYS-07	GÖREV ve SORUMLULUKLAR	SHT-UYUMLULUK İZLEME Madde 7 (2)(c)	Düzeltilen önlemlerin gereken şekilde alınmış olmasının temini amacıyla, Sorumlu Müdüre yönelik bir geri bildirim sistemi mevcut mudur?				CMM 1.4.2
KYS-08	GÖREV ve SORUMLULUKLAR	SHT-UYUMLULUK İZLEME Madde 7 (3)(b)	Bulgunun tespit edildiği departmanın sorumlusu düzeltici faaliyetlerin belirlenmesi ve zamanında yerine getirilmesi ile ilgili sorumluluklarını yerine getirmekte midir?				CMM 1.4.3
KYS-09	UYUMLULUK İZLEME PROGRAMI	SHT-UYUMLULUK İZLEME Madde 9 (2)	İşletmenin, uyumluluk izleme sistem yöneticisi sorumluluğunda ve Sorumlu Müdür onaylı yıllık belirlenen bir denetim programı var mıdır?				CMM 2.2
KYS-10	UYUMLULUK İZLEME PROGRAMI	SHT-UYUMLULUK İZLEME Madde 9 (3)	İşletme denetim planını belirlerken, yönetim, organizasyon, operasyon ya da teknolojik önemli değişiklikler ve aynı zamanda düzenleyici kurallarda olan değişiklikleri de göz önüne alıyor mu?				CMM 2.2

TARİH	DENETÇİ / DENETÇİLER Adı-Soyadı / İmza	DENETLENEN Adı-Soyadı / İmza
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No	Başlık	Referans	Konu	GD	U	UD	Açıklamalar
ATO-001	GENEL HUSUSLAR	SHT-ORA Mad.8	Hava aracı üzerinde eğitim verecek organizasyon, Ticari Hava Taşıma İşletme Yönetmeliği (SHY-6A), Genel Havacılık Yönetmeliği (SHY-6B) veya Balonla Ticari Havacılık Faaliyetleri Talimatı (SHT-Balon) gerekliliklerine göre düzenlenmiş olan işletme ruhsatı sahibi midir? (Sadece teorik eğitim veya simülatörde tip yetkisi eğitimi vermek üzere yetkilendirilen organizasyonlarda işletme ruhsatı gerekliliği aranmaz.)				
ATO-003	GENEL HUSUSLAR	ORA.GEN.140	ATO'nun sahip olduğu herhangi bir tesise, hava aracına, dokümana, kayıta, veriye, prosedüre ya da sertifikasyon ile ilgili materyale SHGM tarafından yetkilendirilmiş kişilerin erişimi sağlanmakta mıdır?				
ATO-004	GENEL HUSUSLAR	ORA.GEN.150	ATO bulguların giderilmesi için aşağıdaki gereklilikleri içeren bir sürece sahip midir? - SHGM tarafından tespit edilen uygunsuzlukları müteakiben ATO tarafından uygunsuzların kök nedenini tanımlanması. - Düzeltici faaliyet planının yapılması ve SHGM ile mutabık kalınan sürede ve SHGM tarafından kabul edilen bir düzeltici faaliyeti uygulamaya konması.				
ATO-005	GENEL HUSUSLAR	ORA.GEN.220	ATO, yeterli kayıt alanı olan ve yürütülen tüm faaliyetlerin güvenilir şekilde izlenmesine imkan veren bir kayıt saklama sistemi kurmuş mudur? Kayıtların ne şekilde tutulacağına yönelik bir prosedür oluşturulmuş mudur? Kayıtlar; hasar, değiştirme ve hırsızlığa karşı korunaklı olacak şekilde saklanmakta mıdır?				
ATO-006	GENEL HUSUSLAR	AMC1 ORA.ATO.210	Yüksek derecede gözetim ve pratik çalışma içeren teorik eğitim derslerinde sınıfta bulunan kursiyer sayısı 28'in altında mıdır?				
ATO-007	GENEL HUSUSLAR	AMC1 ORA.ATO.230(b)	ATO'da görev yapan öğretmenler ile kursiyerlerin lisans, yetki ve sağlık sertifikalarının geçerliliklerinin takibi ATO'nun yapısına uygun bir şekilde yapılmakta mıdır?				



QUALITY AUDIT REPORT / KALİTE DENETİM RAPORU

Audit (Denetim) No	Audit Date (Denetim Tarihi):	Audit Type (Denetim Tipi):		Audit Schedule (Denetim Planı):	
2017-00	#N/A	Internal / İç	Sub-Contractor / Contractor (Alt Yüklenici/Yüklenici)	Planned / Planlı	Non-planned / Plansız
Audited Department / Sub-contractor/Contractor	#N/A	Audited Personnel Name/Sign (Denetlenen Personel Adı-İmza)		#N/A	

CPAR No / DOFI No	PART REF #	AUDIT REFERENCE (S): FINDINGS	L E V E L	CORRECTIVE ACTION		
				DATE DUE	DATE CLOSED	REFERENCE
2017-00-						
2017-00-						
2017-00-						
2017-00-						
2017-00-						
2017-00-						
2017-00-						
2017-00-						
2017-00-						

Auditor (Denetçi)	#N/A	Auditor (Denetçi)	#N/A	Quality Manager (Kalite Müdürü)	Kadir ERDOĞAN Kalite ve Emniyet Md. KAAN Hvac. San. Tic. A.Ş.
Name & Sign / Adı & İmzası		Name & Sign / Adı & İmzası		Name & Sign / Adı & İmzası	

Audit No	Scope of Audit	AUDIT Date	Finding No	Finding LEVEL	Subject	Finding Date	Due Date	Ext. Date	Days before reminder	Closing Date	Status
2023-1	OFFSHORE	6.03.2023	No finding								
2023-2	Muhasebe Finans Md	30.04.2023	No finding								
2023-3	Tedarikçi / ACM Dispatch	20.05.2023	No finding								
2023-4	Uçuş İşletme Md	6.06.2023	1	2	Document Distribution	6.06.2023	6.09.2023	-	0	23.06.2023	CLOSE
2023-5	Uyumluluk İzleme Md	19.06.2023	No finding								
2023-6	Yer İşletme Md	21.06.2023	No finding								
2023-7	Eğitim Md	12.07.2023	No finding								
2023-8	Emniyet Md	8.08.2023	No finding								
2023-9	Tedarikçi / THY OPET	22.10.2023	No finding								
2023-10	Güvenlik Md	9.12.2023	No finding								
2024-1	OFFSHORE	15.01.2024	No finding								
2024-2	Uyumluluk İzleme Md	8.02.2024	No finding								
2024-3	Emniyet Md	11.03.2024	No finding								
2024-4	Uçuş İşletme Md	17.04.2024	No finding								
2024-5	Muhasebe Finans Md	19.04.2024	No finding								
2024-6	Tedarikçi / ACM Dispatch	30.05.2024	No finding								
2024-7	Yer İşletme Md	5.06.2024	No finding								
2024-8	Güvenlik Md	22.10.2024	No finding								
2024-9	Eğitim Md	30.12.2024	1	2	OPC checks	30.12.2024	30.03.2025	-	0	27.03.2025	CLOSE
2025-1	Uyumluluk İzleme Md	12.02.2025	No finding								
2025-2	Muhasebe Finans Md	26.05.2025	No finding								



OPS
AUDIT & FINDING Follow Up (EXTERNAL)

Audit No	Scope of Audit	AUDIT Date	Finding No	Finding LEVEL	Subject	Finding Date	Due Date	Ext. Date	Days before reminder	Closing Date	Status
2023-1	SHGM / OPS	11.05.2023	EPHG-07	1	FTL/Rest	11.05.2023	1.06.2023	-	0	1.06.2023	CLOSE
			Ui-02	G	Manual	11.05.2023	22.06.2023	-	0	22.06.2023	CLOSE
			Ui-17	G	OM-A	11.05.2023	22.06.2023	-	0	22.06.2023	CLOSE
			Ui-29	2	OFP	11.05.2023	22.06.2023	-	0	22.06.2023	CLOSE
			Ui-32	G	Fuel Supply	11.05.2023	22.06.2023	-	0	22.06.2023	CLOSE
			Ui-33	G	SPO.OP.190	11.05.2023	22.06.2023	-	0	22.06.2023	CLOSE
			EĞ-06	2	Distance/Virtual Classroom	11.05.2023	22.06.2023	-	0	22.06.2023	CLOSE
			EĞ-13	2	CRM Trainer Authorization	11.05.2023	22.06.2023	-	0	22.06.2023	CLOSE
			EĞ-15	2	LC Trainer	11.05.2023	22.06.2023	-	0	22.06.2023	CLOSE
			EĞ-17	1	OCT Training	11.05.2023	1.06.2025	-	0	1.06.2025	CLOSE
			EĞ-26	2	LIFUS	11.05.2023	22.06.2023	-	0	22.06.2023	CLOSE
			EĞ-29	2	Commander Training	11.05.2023	22.06.2023	-	0	22.06.2023	CLOSE
			EĞ-32	1	Line Check	11.05.2023	1.06.2025	-	0	1.06.2025	CLOSE
			SMS-20	2	SPI/FDM	11.05.2023	22.06.2023	-	0	22.06.2023	CLOSE
			 Kadir ERDOGAN Quality/Comp. Mont. & Safety Mng. Captain KAAN Hvac. San. Tic. A.Ş.								

	CORRECTIVE & PREVENTIVE ACTION REQUEST FORM DÜZELTİCİ & ÖNLEYİCİ FAALİYET İSTEK FORMU
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CPAR No (DOFI No):	CPAR Date (DOFI Tarihi):	Category - Department or Sub-contractor/Contractor (Kategori - Birim veya alt-yüklenici/yüklenici Adı)	
2024-12	30.12.2024	Eğitim Müdürü	
To the Compliance Monitoring Manager		Reported By: Kadir ERDOĞAN - Güray ÜNLÜ	
AUDIT (DENETİM/TETKİK) / MONITORING (İZLEME) / COMPLIANCE (UYUMLULUK)			
Planned (Planlı)	Non-Planned (Plansız)	Compliance (Uyumluluk)	
X			
NON-CONFORMANCES (UYGUNSUZLUK) OR REQUIREMENTS (GEREKLİLİKLER)			
Internal Audit/Inspection (İç Denetim/Gözetim)	Sub-Contractor Audit/Inspection (Alt Yüklenici Denetim/Kontrol)	Non-Conformanced Product/Service (Uygun Olmayan Ürün/Hizmet)	Customer / Related Party Complaint (Müşteri/İlgili Taraf Şikayeti)
X			

Description of Findings (Bulgunun Tanımı) and/or Environmental and Work Incident (Çevre ve İş Kazası):

Yenileme Eğitimi ve Kontrolü, OPC kontrolünde; CRM yeteneklerinin kontrolünün yapılmadığı görülmüştür.

Level of Finding (Seviye veya Önem)	Time Limitation (Süre Sınırlaması)	Reference of Requirements (Gerekliklerin Referansı)
Level 2	30.03.2025	AMC1 ORO.FC.230 (b) (1) (ii) (F)

Route Cause of Non-compliance or Compliance of Requirements (Kök Nedenler veya Şartların tamamlanması)

Uçuşlarda CRM yetenek kontrolü, OM-D 02.01.05.06 Line Check kontrollerinde yapılmakta olduğu için yeterli olduğu düşünülmektedir. Ancak ilgili referansın yeni revizyonunda CRM kontrolü OPC lere de eklenmiş olup farkındalık eksikliği oluşmuştur.

Suggested Correction (Önerilen Düzeltme)

OM-D 02.01.05.05 OPC prosedürüne uygun olarak, CTF-16 OPC Kontrol formunda revizyon yapılmış, CRM kontrolü maddesi eklenmiş ve 2 pilotun OPC kontrolünde ilgili CRM yeteneği değerlendirilmiştir.

Compliance Monitoring Manager

Corrective action required	Corrective action NOT required
	X

Remarks (Açıklama): This form is submitted to related department manager/sub-contractor and Accountable Manager both it is first issued and after completion of activity. (Bu form ilgili birim müdürüne/alt yükleniciye ve Sorumlu Müdür'e hem ilk yayımlandığında hem de faaliyet tamamlandığında mail ile bildirilir)

Corrective Action or Preventive Action to eliminate the root causes (Kök nedenleri ortadan kaldıracak düzeltici veya önleyici Faaliyet)	Responsible Person (Sorumlu Personel):
OPC kontrolleri yeni oluşturulan form kullanılarak yapılacaktır.	Ali Metin UZUN
Date (Tarih)	Signature Responsible Person (İmzası):
27.03.2025	
In Case of EXTENSION (Bulgu Süre Uzatımı halinde)	Extension Due Date: (Uzatma Son Bulma Tarihi)
Extension Requested By: (Talep Eden)	Accepted By: (Kabul Eden)
Extension reason :-	(if there is) extension reject reason:-
Date / Tarih - Sign / İmza	Date / Tarih - Sign / İmza

Closing of CPAR
(Düzeltilici ve Önleyici İşlem Kapatması)

Compliance Monitoring Manager (Uyumluluk İzleme Müdürü)

Correction and corrective action verified	Report Closed
X	X
Seal & Sign (Kaşe-İmza):	Date / Tarih :
Kadir ERDOĞAN Uyumluluk İzleme ve Emniyet Md. KAAN Hvac. San. Tic. A.Ş.	27.03.2025

Period/ Dönem: 202x-(1 / 2)	Date/ Tarih: xx.xx.20xx	Location/ Yer: Kaan Heliport / Istanbul
ATTENDANTS / KATILIMCILAR		
Position/ Görevi	Name SURNAME/ Adı SOYADI	Signature/ İmza
Accountable Manager		
Quality / Compliance Monitoring & Safety Manager		
Quality Engineer		
Flight Ops & Training Manager		
ATO Training Manager		
Cont.A/W & Maintenance Mng.Dep		
Admin Cheef & Heliport Manager		
Ground Ops & Security Manager		
Account & Finance Manager		
Supply Chain Manager		
HSE Advisor & Specialist		
REVIEWS / GÖZDEN GEÇİRİLEN KONULAR		
1.) Kalite ve Emniyet Politikasının gözden geçirilmesi / Review of Quality Safety Policy		
2.) Kalite / Çevre / ISG Denetim Sonuçları Review of Audits and been audited in the period		
3.) Yasal Şartlara Uyum Harmony with the legal procedures		
4.) EYS Uygulama Planının Etkinliği Efficiency of SMS implementation plan		
5.) Hedeflere Ulaşma Derecesi Degree of reaching goals		
6.) Genel Gündem, Süreç Performansı ve Ürün / Hizmet Uygunluğu		

General Agenda, Process Performance and Product / Service Compliance	
7.) Düzeltici ve Önleyici Faaliyetlerin Durumu Corrective and Preventive Actions	
8.) Politika ve Hedefler Doğrultusunda Emniyet Performansı Safety Performance iaw Policies and Objectives	
9.) Emniyet Yönetim Sürecinin Etkinliği Effectiveness of the Safety Management Process	
10.) Önceki YGG ve EGGK' dan Gelen Takip Faaliyetleri Follow-up Activities from Previous MRB and SAG meeting	
11.) KYS'ni Etkileyebilecek Değişiklikler Changes That May Affect the Quality Management System	
12.) Acil Durum Eylem Planının GG Review of Emergency Response Plan	
13.) Müşteri Geri Beslemesi Feedback of customers	
14.) Kaynak ihtiyaçları / Resource needs	
15.) Emniyet Performansına erişebilmek için sağlanacak gerekli Kaynaklar / Necessary resources to be provided to achieve Safety Performance	
16.) KYS'nin ve süreçlerin etkinliğini iyileştirilmesi / Improving the efficiency of the QMS and processes	

17.) İyileştirme Önerileri Improvement suggestions	---
18.) Müşteri şartları ile ilgili ürün/hizmet iyileştirmesi / Product / service improvement related to customer conditions	---
19.) Devam eden faaliyetler On-going activities	

DECISION TAKEN / ALINAN KARARLAR		RESPONSIBLE UNIT / SORUMLU BİRİM	DUE DATE / TERMİN TARİHİ
1.) EEG ye verilen stratejik talimatlar / Strategic instructions to the SAG	Olay bildirimlerinin EEG toplantılarında ele alınmaya devam edilmesi,		

-- 0 --

Emniyet – Tehlike Bildirim Formu / Safety – Hazard Report

Date/ Tarih: xx.xx.202x		Report No / Rapor No: (Filled by SMM/EM Dolduracak) 202x-x	
Non-Compliance of Activity Uygunsuz Durum	X	Non-compliance of supplied Product / Service Uygunsuz Ürün / Hizmet	
Description of Reporting Issue / Bildirilen Konu Açıklaması :			
EFB applications failure or erroneous data delivered.			
LOCATION / YER (If Appropriate / Eğer Gerekliyse):.....			
CAUSE OF Report IF KNOWN / Bildirimin SEBEBİ – EĞER BİLİNİYORSA :			
(What do you think on this situation occurs? / Bu olayın neden ortaya çıktığını düşünüyorsunuz?)			
If desired / Eğer istenirse		Safety Manager / Emniyet Müdürü	
Reported By / Rapor Eden:			
Name&Surname / Adı-Soyadı:		Name & Surname Adı-Soyadı	
		Kadir ERDOGAN	
Sign / İmza		Sign / İmza:	

Emniyet – Tehlike Bildirim Formu (Değerlendirme) / Safety – Hazard Report (Evaluation)

Concerning SAFETY ?
EMNİYETLE İlgili mi ?

YES
EVET

X

NO
HAYIR

This form has been sent to the responsible Unit Manager(s) stated below for evaluation by Safety Manager /
İlgili Form Emniyet Müdürü tarafından değerlendirilmek üzere aşağıda belirtilen İlgili Md.lüğe gönderilmiştir

RESPONSIBLE UNITS / İLGİLİ BİRİMLER					
Comp.Mon./Qua Mng.		Flight Ops.Mng.	X	Ground Ops.Mng.	
Safety Mng.		Training Mng.		Security Mng.	
ATO Head of Training		CAMO Mng.		Admin Chief	
EFB Administrator	X	Maintenance Mng.		Helipport Mng.	
Please complete the risk evaluation and return this form to Safety Mng. until : Lütfen risk değerlendirmesini tamamlayıp,miat tarihine kadar formu Emniyet Müdürüne teslim ediniz:				xx / xx / 202x	

RESPONSIBLE UNIT RISK EVALUATION / İLGİLİ BİRİM RİSK DEĞERLENDİRME SAFHASI					
RİSK İHTİMALİ / RISK LIKELIHOOD	RİSKİN SIKLIĞI / RISK SEVERITY				
	FELAKET BOYUTUNDA / CATASTROPHIC (5)	TEHLİKELİ / HAZARDOUS (4)	ÖNEMLİ / MAJOR (3)	ÖNEMSİZ / MINOR (2)	GÖZ ARDI EDİLEBİLİR / NEGLIGIBLE (1)
(5) SIK / FREQUENT	25	20	15 Kabul edilemez Unacceptable	10 Gözden Geçirme Review	5
(4) ARA SIRA / OCCASIONAL	20	16	12	8	4 Kabul Edilebilir Acceptable
(3) UZAK İHTİMAL / REMOTE	15	12	9	6	3
(2) OLASI DEĞİL / IMPROBABLE	10	8	6	4	2
(1) PEK MUHTEMEL DEĞİL / EXTREMELY IMPROBABLE	5	4	3	2	1

Total Risk Nr./ Toplam Risk No.	Root Cause / Kök Neden	Trigger / Tetikleyici	Preventive Action / Önleyici İşlem	Existing Controls / Mevcut Kontroller	Hazard Outcome / Tehlikenin Sonucu	Mitigations / Azaltıcı Tedbirler	Barrier / Önlem	Due Date/ Son Bulma Tarihi	Action Date/ Gerçekleşme Tarihi	New Total Risk Nr./ Yeni Toplam Risk No.
Red/Kırmızı	Electrically malfunction	1.		1. Navigation information will still be available from the Class 3 EFB and as well as the FMS and ATC.	Non readily access to navigation chart information (the assumption is there is no paper copy of terminal charts on board)	Resetting a stuck or faulty APP.		20.06.2022	02.06.2022	Red/Kırmızı
Yellow/Sarı		2.		2.						-
3 x 2 = 6		3.		3.						Yellow/Sarı
Green/Yeşil		4.		4.						-
		5.		5.						Green/Yeşil
		6.		6.						1 x 2 = 2

X ACCEPTABLE RISK / KABUL EDİLEBİLİR RİSK

□ I WILL START ABOVE MITIGATION MEASURES / YUKARIDAKİ AZALTICI ÖNLEMLERİ BAŞLATACAĞIM

(Emniyet Yöneticisine değerlendirme için teslim ediniz)

RESPONSIBLE UNIT MANAGER / SORUMLU BİRİM YÖNETİCİSİ

S. Emrah CANBAZGİL

POSITION / GÖREVİ : EFB Administrator

SIGNATURE / İMZA :

DATE / TARİH : xx.xx.202x

(Hand in to Safety Manager for evaluation)

FINAL EVALUATION by SAFETY MANAGER / EMNİYET YÖNETİCİSİ SON DEĞERLENDİRME SAFHASI

OPEN / AÇIK		CLOSE / ACCEPTED KAPALI / KABUL EDİLMİŞTİR	X
Sent to SAG / SRB SAG / SRB ye Aktarılmalı	X	Should be Reviewed / Gözden Geçirme Süreci Uygulanmalı	NO
Safety Manager / Emniyet Müdürü Name & Surname / Adı-Soyadı : Sign / İmza : Date / Tarih :		Info to REPORTER / YES : RAPORLAYAN'A Geri Bildirim : NO : Info/Record: Responsible unit(s), SAG, SMS File Bilgi/Kayıt: İlgili birim(ler)e, EEG, EYS dosyaya	