



NIGERIAN CIVIL AVIATION AUTHORITY

AVIATION HOUSE

P. M. B. 21029, 21038, Ikeja, Lagos, Nigeria

CL: O-OPS 025A COMMERCIAL BANNER TOWING (Authorisation or Inspection)

Record ID:		Inspector		Type of Operation		Activity Number – Checklist	
Date Accomplished:		# Issues		Operator		Tracking #	
Flight #:	From:	To:	AC Registration:		Facility:		Type:
PIC:		SIC:			Training Manager:		
Supervisory Check Trainer:						Check Approval	

Instructions for Use:

1. Check **'S'** column if you reviewed the record, procedure or event and it is **'Satisfactory'**.
2. Check **'U'** column if you reviewed the record, procedure or event and it is **'Unsatisfactory'**.
3. Check **NS (not seen)** column if you did not review the record, procedure or event or you do not have adequate information to make a valid comment.
4. Check **NA (not applicable)** column, if the line item is not required in this particular situation.
5. Enter any notes on reverse side regarding a 'U' answer for transfer to the Safety Issues Resolution Report.
6. For later reference, precede any notes with the appropriate question number.

S/N	NCAA FILES	S	U	NS	NA
1.	Pilot License				
2.	Medical Certificate				
3.	Instruments Rating				
	AIRCRAFT	S	U	NS	NA
4.	Certificated				
5.	Airworthiness				
6.	Insurance				
7.	A tow hook and release control system that meet applicable standard of airworthiness.				
	DEMO FLIGHT	S	U	NS	NA
	(a) Pick up				
	(b) Drop				

REMARKS & OBSERVATIONS

INSPECTOR SIGNATURE

Additional comments attached =>