MINIMUM EQUIPMENT LIST (MEL) CHECKLIST

Please complete the form in BLOCK CAPITALS using black or dark blue ink.

SECTION 1 – Applicant Details

|  |  |
| --- | --- |
| Operator Name | AOC No |
|  |  |

SECTION 2 – Aircraft Details

|  |  |
| --- | --- |
| Aircraft Type | Registration Mark(s) |
|  |  |

SECTION 3 – Application Details

|  |
| --- |
| Application Type |
|[ ]  Initial MEL |
|[ ]  MEL Amendment | [ ] Operator Instigated | [ ]  Brunei DCA Instigated |
| MEL Revision No. | MEL Revision Date |
|  |  |
| Documents Provided  |
|[ ]  Operator’s customised MEL; |
|[ ]  TCDS State MMEL, Manufacturer’s Aircraft Flight Manual and Deviation and Dispatch Guide; |
|[ ]  Supplemental MEL |

**SECTION 4 – Checklist**

|  |  |  |  |
| --- | --- | --- | --- |
|  | **S** | **U** | **N/A** |
| **1** | **The MEL is based on the current MMEL date and revision number** |[ ] [ ] [ ]
| **2** | **Contains the ATA Table of Contents** |[ ] [ ] [ ]
| **3** | **Contains the Preamble** |[ ] [ ] [ ]
| **4** | **Contains the Definitions Section same as the MMEL** |[ ] [ ] [ ]
| **5** | **Contains list of effective pages and the other elements of the control page(s)** |[ ] [ ] [ ]
| **6** | **All items addressed in the MMEL covered in the MEL****If no, include explanation:** |[ ] [ ] [ ]
| **7** | **Items have been added****If so, include description:** |[ ] [ ] [ ]
| **8** | **Each page of the MEL can be matched to MMEL to confirm revision number and date****of revision** |[ ] [ ] [ ]
| **9** | **Describes the operations procedure for placarding:** |[ ] [ ] [ ]
| **10** | **Describes the procedure for recording discrepancies:** |[ ] [ ] [ ]
| **11** | **Describes the procedure for clearing discrepancies:** |[ ] [ ] [ ]
| **12** | **Are all items at least as restrictive as the MMEL:** |[ ] [ ] [ ]
| **13** | **Remarks or exceptions for specific relief developed:** |[ ] [ ] [ ]
| **14** | **Flight Crew notification procedures established** |[ ] [ ] [ ]
| **15** | **MEL is tailored for the equipment installed and the service bulletins implemented** |[ ] [ ] [ ]
| **16** | **MEL Management Programme has been established** |[ ] [ ] [ ]
| **17** | **MEL training programme** |[ ] [ ] [ ]
| **18** | **Operational and Maintenance procedures is according to the MME.** **If not, it must provide the same level of safety:** |[ ] [ ] [ ]

|  |  |
| --- | --- |
| **Airworthiness recommendation received:** | [ ]  |
| **Comments from airworthiness’** |

**SECTION 5 – Signature Block**

|  |  |
| --- | --- |
| Name of Inspecting Staff Checking | Position |
|  |  |
| Signature | Date |
|  |  |

|  |  |
| --- | --- |
| Name of Approving Inspector | Position |
|  |  |
| Signature | Date |
|  |  |