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| **SECTION 4A – OPERATOR’S AOC AUDIT RESPONSE (ATTACHMENT A)** |
| **OPERATOR** | **AOC NUMBER** | **DATE** |
| Click or tap here to enter text. | Click or tap here to enter text. | Click or tap to enter a date. |
| **CODE** | **FINDING/OBSERVATION** | **DAYS** |
| Click to enter text. | Click or tap here to enter text. | Click to enter text. |
| **OPERATOR’S FEEDBACK** | **REMARKS** |
| **Immediate Corrective Action**  |  |
| **Root Cause Analysis** |  |
| **Root Cause Correction** |  |
| **Follow Up** |  |
| **Closure** |  |
| Name: Click or tap here to enter text.Designation: Click or tap here to enter text.Date: Click or tap to enter a date. | Signature |

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| **SECTION 4B – REMARKS BY CAAM****(TO BE COMPLETED BY PRINCIPAL OPERATIONS INSPECTOR AFTER REVIEWING OPERATOR’S FEEDBACK)** |
| The corrective action has been reviewed, verified and found to be: **ACCEPTABLE / UNACCEPTABLE** |
| If **UNACCEPTABLE**, the reason for rejecting the corrective action: |
| Name: Date:  | Signature |