



**U.S. DEPARTMENT OF TRANSPORTATION
FEDERAL AVIATION ADMINISTRATION**

**ORDER
FS 8260.57B**

Flight Standards Policy

Effective Date:
01/10/2020

SUBJ: Oversight of Non-FAA Instrument Flight Procedure Service Providers

This order establishes Flight Standards Service policy, guidance, and standardization for the oversight of non-FAA Instrument Flight Procedure (IFP) service providers. This guidance outlines the surveillance methods along with audit, program review and compliance processes utilized by the Flight Procedures & Airspace Group. The purpose is to ensure service providers comply with safety policies, processes and practices for managing all aspects of Title 14 of the Code of Federal Regulations (14 CFR) part 95/97 or Special non-14 CFR part 95/97 Instrument Flight Procedures.

A handwritten signature in cursive script, reading "Rick C. Domingo", is positioned above the printed name.

Rick Domingo
Executive Director, Flight Standards Service

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Chapter 1. General Information

1-1-1. Purpose of this order. This order establishes Flight Standards Service policy, guidance, and standardization for the oversight of non-FAA service providers who develop, maintain, and validate 14 CFR part 95/97 or special (non-14 CFR part 95/97) IFP and airspace.

1-1-2. Audience. The primary audience for this order is Flight Standards, Flight Technologies and Procedures Division, specifically the Flight Procedures and Airspace Group Aviation Safety Inspectors (ASIs). The Flight Procedures and Airspace Group is authorized and responsible for FAA oversight of non-FAA service providers.. The secondary audience for this order non-FAA IFP service providers. Non-FAA service provider is used interchangeably with “service provider,” who have been authorized by the FAA to develop 14 CFR part 95/97 or special non-14 CFR part 95/97 instrument procedures.

1-1-3. Where you can find this order. You can find this change on the Directives Management System (DMS) [Website](#).

1-1-4. Explanation of changes. Significant areas of new directive, guidance, policy, and criteria as follows:

a. General.

- (1) Updated all “AFS-460” references to indicate “Flight Procedures & Airspace Group.”
- (2) Updated all “AFS” references to indicate “Flight Standards.”
- (3) Deleted all references to “AFS-400.”
- (4) Updated all “branch” manager references to indicate “section.”
- (5) Deleted all “AFS-460” from all references to the Oversight SharePoint/KSN site.
- (6) Deleted parenthesis emphasizing various forms and templates.
- (7) Updated approval authority on cover page.
- (8) Updated Compliance and Enforcement section to conform to Order 2150.3.

b. Chapter 1, paragraph 1-1-5. Inserted individual audit & program review program responsibilities and deleted Order FS 1100.1, Flight Standards Service Organization Handbook, AFS-460 responsibilities.

c. Chapter 2, paragraph 2-1-1c. Revised IFPV reference from Order 8900.1, Flight Standards Information Management System (FSIMS) to AC 90-113, Instrument Flight Procedure Validation of Performance Based Navigation Instrument Flight Procedures.

d. Appendix A. Updated related publication list.

e. Appendix B, Figure B-5. Separated audit and program review examples in the objective paragraph to clarify oversight reference requirements

1-1-5. Responsibilities. The Flight Procedures and Airspace Group's designated manager assigns specialists to the following functions; oversight program specialist, team leader, and team member.

a. Oversight Program Specialist. The Flight Procedures and Airspace Group's designated manager assigns a specialist to manage the following functions:

- (1) Maintenance of this order.
- (2) Submits the annual audit or program review schedule.
- (3) Maintains the following tracking logs on the designated Oversight site:
 - (a) Audit,
 - (b) Review,
 - (c) Safety Compliance, and
 - (d) Feedback.
- (4) Provides assistance to audit or program review team leaders with document preparation and storage.
- (5) Maintains the designated Oversight site.

b. Team Leader. The team leader is responsible for, but not limited to, the following functions:

- (1) Coordinates audit or program review requirements and finalizes the objective, scope, and focus areas with team members and the designated manager,
- (2) Prepares the audit or program review requirements checklist with the project number, date(s), location, service provider, and any special requirements, and
- (3) Prepares an audit or program review plan, service provider notification letters, team folder,
- (4) Conducts team briefing per checklist (Figure B-6) at any time prior to the start of the audit or program review. Facilitates the audit or program review, onsite at the company location, alternate location, or virtual meeting (as approved by the Flight Procedures and Airspace Group's designated manager during plan submittal). The location selected will provide an area to review records and conduct private discussions,
- (5) Prepares and submits the audit or program review report to the Flight Procedures and Airspace Group's designated manager, and

(6) Files documents outlined in this order onto the designated Oversight site (annual schedule, audit/program review plan, final report, feedback form, etc.).

c. Team Member. A team member is responsible for, but not limited to, the following functions:

- (1) Uses the requirement checklists to record noncompliance information,
- (1) Notifies the team leader of any suspected safety critical or other findings, and
- (2) Attends team briefings and ensures that the team leader covers all checklist items.

Chapter 2. Surveillance

2-1-1. General. Flight Procedures and Airspace Group's designated ASI conducts surveillance daily with or without normal day-to-day interaction with service providers [i.e., Procedure Review Board (PRB) procedures, Obstruction Evaluation/Airport Airspace Analysis (OE/AAA), instrument flight procedure validation (IFPV) activities, etc.]. Observation of negative trends or concerns should be documented (email, memo, etc.) and elevated to the designated manager and may require an audit or program review to determine if the issue is a system wide problem or is service provider specific (Chapter 3). The following methods of surveillance are conducted to ensure continuing compliance.

a. Operations manual. As a minimum, the Flight Procedures and Airspace Group's designated section will review service provider's operations manual biennially for compliance with all applicable guidance outlined in AC 90-110, Instrument Flight Procedure Service Provider Authorization Guidance for Space-based Instrument Flight Procedures. The Flight Procedures and Airspace Group's designated Oversight site is used to track timeliness of submission and coordinate recommended changes. Service providers should make every effort to incorporate changes and resubmit for acceptance within 30 days.

b. Procedure Review Board. A panel including Terminal Instrument Procedures (TERPS) and operational specialties review procedures scheduled by the Procedure Review Board.

c. IFPV activities. The Flight Procedures and Airspace Group will manage and direct oversight of all IFPV activities in accordance with Order 8900.1, Flight Standards Information Management System and Order 2150.3, FAA Compliance and Enforcement Program.

2-1-2. Analysis. The Flight Procedures and Airspace Group will analyze surveillance results for trends and take appropriate action when there is a negative trend (safety critical issues require immediate action/resolution). The action taken will be oral or written counseling compliance resolution or the scheduling of an official audit or program review. The safety risk will determine the appropriate course of action.

Chapter 3. Audit and Program Review Process

3-1-1. General.

a. Risk-based system audit or program review. The Flight Procedures and Airspace Group conducts risk-based system audits to determine a service provider's compliance with legal, regulatory, and statutory requirements of 14 CFR and Safety Management System (SMS) guidelines. As such, a statutory audit, hereafter referred to as "audit," is conducted for service providers developing 14 CFR part 97 instrument procedures to be published in the Federal Register. A non-statutory audit, hereafter referred to as a "program review," is conducted for service providers developing special instrument procedures not published in the Federal Register to determine a service provider's compliance with safety policies, processes, and practices for managing all aspects of IFP design.

b. Service provider audit/program review. Service providers should expect a biennial audit/program review.

3-1-2. Initiating an Audit or Program Review. Initiation is typically based on biennial timeline, risk-based surveillance, complaints, incidents/accidents, safety compliance issue(s), or operator request.

a. Format. The Flight Procedures and Airspace Group can initiate an audit or program review in any format (i.e., written request, e-mail, and memorandum).

b. Annual schedule. The oversight program manager develops a schedule using Form 8260-31, Annual Audit and Program Review Schedule, (Figure B-1) and submits it to the Flight Procedures and Airspace Group's designated manager for approval no later than 30 calendar-days before the beginning of the fiscal year.

c. Assignment of project number. The oversight program specialist assigns a unique project number for the audit or program review and uses it when entering information into the Audit and Program Review Tracking log (Figure B-2). The recording convention for the project number is "ADT or RVW-FY20-000." The "ADT" indicates audit, "RVW" for program review, the two-digit number indicates the FY, and the three-digit sequential number indicates the specific project. The project number must be used on all documents relating to the audit or program review.

3-1-3. Pre-Audit or Program Review Activities.

a. Team assignment, collection, review, and analysis of data. A team typically consist of an ASI, TERPS specialist, operations specialist, or other member as assigned by the designated manager. Not all team members are required to travel to the location; however, they will be available by phone/virtual meeting during the planned audit or program review period (specific times may be coordinated in advance with the team leader).

(1) The audit/program review team gathers documentation related to the service provider. Pertinent documentation will include the following:

- (a) The service provider's relevant records, manuals, procedures, etc.
- (b) Historical information (databases, evaluation reports, etc.).

b. Development of requirements checklist. The team leader develops the requirements checklist using the Form 8260-32, Audit or Program Review Requirements Checklist (Figure B-3). The team leader must ensure that copies of applicable requirements and procedures needed to conduct the audit or program review are available for the team's use. The complete standardized checklist for an audit or program review is stored on the Flight Procedures and Airspace Group's designated Oversight site.

Note: Each audit or program review is different as are the requirements on which it is based. The level of difficulty in identifying the appropriate requirements can vary depending on the complexity, scope, and objective. The checklist can be tailored with additional questions as needed.

(1) The checklist questions are worded to be answerable only by "yes," "no," or may be "not-applicable (N/A)" added in the comments field. The questions should be explicit, evidence-based, and written in a way that elicits answers clearly indicating compliance or noncompliance with the requirement. For example, when determining compliance with Order 8260.19, paragraph 2-8-1 (which states review all instrument procedures to ensure that requirements for obstacle clearance, navigational guidance, safety, and practicality are met), then the following questions would be appropriate:

(a) Is there evidence indicating that operational personnel comply with the minimum frequency of review of instrument procedures?

(b) Is there evidence indicating that operational personnel properly document periodic reviews?

(2) Describe a sampling.

(a) Describe the techniques to be used (i.e., interviews, observations, and/or review records). Be specific. For example, *"auditors (or reviewers) will record a sampling of procedure documentation."*

(b) Since it is impractical to review all documentation, the audit or program review is based on a representative sample taken from the system. In this section, when reviewing records, answer the following questions:

1. What does a representative sample look like (i.e., what percentage of the population will be looked at)?
2. What is the sampling procedure?
3. Where is the evidence needed to review and determine compliance?
4. What records will be reviewed?

c. Audit or program review plan preparation and approval. The team leader will have a team meeting to finalize the audit or program review checklist and plan within 45 calendar-days prior to the start of the audit or program review (paragraph 3-1-3). The team leader prepares the final plan using the Audit or Program Review Plan template (Figure B-4) and submits the checklist and plan to the designated manager for review and approval within 30 calendar-days of start to allow time for review and edits by the designated manager. Retain the original approved plan in the team lead folder and place a copy on the designated Oversight site

d. Notification.

(1) Scheduled audit or program review. After coordinating specific dates with service provider management on the IFPV activity tracker, the team leader prepares an official notification letter from the division manager to the service provider using the Notification Letter template (Figure B-5). Team Leader will submit the notification letter to administrative assistant for processing and circularization of signatures. Upon receipt from the division manager, the administrative assistant sends the signed notification letter to the service provider at least 30 calendar-days before the start of the audit or program review. A copy of the notification letter is posted on the designated Oversight site.

(2) Unscheduled audit or program review. An unscheduled audit or program review resulting from initiation methods in paragraph 3-1-2 does *not* require written notification to the division manager. The designated manager verbally advises division and service provider managers of the short notice visit and assigns team leader. Team leader schedules arrival and coordinates access to the service provider location.

e. Team folder preparation. The team leader and/or team member prepares folders that include a copy of the approved audit or program review plan and notification (for scheduled visits only), requirements and team leader checklists, contact information (i.e., designated manager, oversight program specialist), and other necessary documents.

f. Team briefing. The team leader conducts a team briefing using Form 8260-33.1, Team Briefing Checklist, (Figure B-6) before the onsite audit or program review. It is a requirement that team members attend and ensure that the team leader covers all checklist items.

3-1-4. Conducting the Audit or Program Review. It is an expectation that team members carry out their assigned tasks so as not to interfere with the office's operations.

a. Opening meeting. The team leader conducts the opening meeting with the service provider using Form 8260-33.2, Opening Meeting Checklist (Figure B-7). Ensure all individuals attending the meeting sign-in using Form 8260-33.4, Opening and Closing Meeting Attendance (Figure B-9). Team members must attend and ensure that the team leader covers all checklist items.

b. Collection and verification of data. Team members use the audit or program review requirement checklists to record information that could indicate noncompliance with the requirement noted in the checklist. When necessary, team members may request copies of pertinent documentation. Instructions for completing the requirement checklists are as follows:

(1) Record evidence and/or observations. In addition to determining compliance with the requirement, complete the evidence and/or observation field of the checklist for each question. Provide a brief explanation of how compliance was determined. Be sure to record specific information about what was reviewed and observed (e.g., name, document title, date, time, operation observed, etc.) Also consider peripheral issues that may be relevant to (but not necessarily mandated by) the specific requirement in the checklist. Safety critical or other items are recorded as well.

(a) Here is an example of an explanation of how compliance was determined:

At Sky High Aviation, we looked at 12 employee's training records and found that they all had the mandatory briefing item (Area Navigation (RNAV) Turn Altitude Determination) for clarification and standardization of methods used to determine the altitude used in turn radius calculation for area navigation (RNAV) approach procedures by the deadline of February 16, 2007.

(b) Here is an example of recording information appropriately:

At Sky High Aviation, we reviewed the Memorandum dated February 26, 2007 for guidelines on turn altitude determination. We found the information in paragraph 2 to be satisfactory.

(c) Here is an example of an observation:

It was observed that the announcement for the next required briefing was haphazardly placed on a table with other documents. The office manager was advised that these announcements should be prominently placed at a location where all personnel can see them.

(2) Additional comments. Use this space for additional comments or if there is not enough room in the evidence and/or observation box.

(3) Complete the checklist. The team leader should work with team members to complete all of their checklists before leaving the service provider's location.

c. Recording findings and observations. Identifying and reporting results.

(1) Safety critical finding. This finding indicates the existence of a severe operational discrepancy that adversely affects the safety of the National Airspace System (NAS). Team members must immediately notify the team leader of any suspected safety critical finding. The team leader must immediately report the finding to and seek guidance from the designated manager. If the designated manager acknowledges the finding as safety critical, the division manager and oversight program specialist are notified. The team will process the safety critical finding according to Order 2150.3 and Chapter 4 of this order.

(2) Safety hazard finding. This finding indicates noncompliance with a safety standard or requirement that results in a hazard in the NAS. The designated manager determines whether a safety hazard finding will be handled by the formal or informal compliance process for tracking and resolution.

(3) Safety compliance findings. Safety compliance findings indicate a failure to follow safety standards; however, has not yet produced a safety hazard. If determined by the designated manager to be valid, the audit or program review report notes these findings, and the informal compliance process is initiated.

(4) Observations. Observations document a procedure, practice, or activity of a positive or negative nature observed during the audit or program review. The team leader (unless otherwise assigned by the designated manager) will track and resolve negative observations requiring follow-up action from the service provider.

d. Team briefings.

(1) Daily team briefings. The purpose of team briefings is to allow team members the opportunity to update the team leader on the progress of the audit or program review. The team leader can schedule team briefings at any time during an audit or program review. Sub-team leaders assigned to multiple teams will brief and/or update the team leader daily.

(2) Final team briefing. The team leader conduct a final team briefing to discuss the audit or program review results and reach a consensus on data provided to the service provider during the closing meeting. The team leader makes the final decision if the team cannot reach a consensus. The team leader contacts the designated manager if necessary to discuss the audit or program review results, outstanding actions, and any issues or concerns prior to conducting the closing meeting.

(3) Closing meeting. The team leader conducts a closing meeting with the service provider using the Form 8260-33.3, Closing Meeting Checklist (Figure B-8). Team members must attend and ensure that the team leader covers all checklist items. Ensure all individuals attending the meeting sign in using Form 8260-33.4, Opening and Closing Meeting Attendance (Figure B-9). At the conclusion of the closing meeting, the team leader provides the service provider with Form 8260-34.1, Audit Process Feedback (Figure B-10) or Form 8260.34.2, Program Review Process Feedback (Figure B-11). The service provider receives this form to solicit feedback specific to the Audit or Program Review process. Completing this form is optional. All Audit or Program Review process feedback forms issued to and received from the service provider are recorded on the Feedback Tracking log (Figure B-12). The oversight program specialist analyzes feedback information and reports the results to the designated manager.

e. Safeguarding property. Possession and security of the property provided by the service provider (i.e., original documents, equipment, furnishings) for use by the team during the audit or program review is the team leader's responsibility.

(1) The team leader must ensure that the team:

- (a) Exercises care in the use of that property,
- (b) Prepares an inventory of any original documents received,
- (c) Verifies if the item is suitable for the intended use,

- (d) Protects and safeguards property from damage or loss, and
- (e) Ensures the safe return of service provider property when required.

(2) If any item belonging to a service provider is lost, or damaged, the team leader must report it to the service provider and the oversight program specialist. The oversight program specialist must maintain a record of the incident.

3-1-5. Post-Audit Activities. Upon completion of the onsite portion of the audit or program review, the team must complete the following activities:

a. Post-audit team meeting. During the final data review, the team reviews and analyzes the requirements checklist and data gathered during the Audit or Program Review. The team leader will coordinate requirements for additional information with the designated manager prior to notifying the service provider. The Audit or Program Review concludes five business days after the collection of all data.

b. Validation meeting.

(1) All safety compliance issues will be resolved in accordance with the compliance process as outlined in Chapter 4.

(2) The oversight program specialist documents all safety critical, safety hazard, safety compliance findings, and/or negative observations on the Safety Compliance Tracking log (Figure B-13) for resolution.

(3) Unless otherwise assigned by the designated manager, the team leader is responsible for ensuring the completion of all items requiring follow-up (informal and formal safety compliance issues, or negative observations).

c. Audit or Program Review report. The team leader submits a draft report to the designated manager at the conclusion of the Audit or Program Review (within seven calendar-days after collecting all data) using the Audit or Program Review Report template (Figure B-14). Instructions for completing the Audit or Program Review report are as follows:

(1) Introduction.

(a) Background. Identify any pertinent events that may have led the Flight Procedures and Airspace Group to conduct an Audit or Program Review. Was there an increase in procedure development errors, user complaints, accidents, erroneous data, etc. indicating safety risk(s) with a procedure or development tools etc.?

(b) Objective. The same objective that was identified on the Audit or Program Review plan should be used for the report. The Flight Procedures and Airspace Group conducts an audit or program review to determine a service provider's compliance with SMS requirements and safety standards contained in FAA orders, notices, etc. The following is an example of what can be used to describe the objective: "Flight Procedures and Airspace Group conducted an

audit (or program review) to determine service provider compliance with requirements for conducting periodic reviews of instrument approach procedures.”

(c) Scope. The same scope identified on the Audit or Program Review plan should be used for the report, unless further research helped to narrow the scope. The scope identifies the procedures or systems reviewed or observed during an audit or program review, how the team determined compliance, where the team looked to find objective evidence (e.g., training records, direct observation of procedure development operations, publications, etc.). On-site portion of the audit or program review: List the dates and location for each office visited.

1. Requirements. List all requirement documents (e.g., FAA orders, notices, standard operating procedures, etc.) used to verify compliance.

2. List all documents in bullet format;

3. Include the correct document number and title.

(d) Methodology. List the tools and techniques used to conduct the audit or program review.

Example: The Flight Procedures and Airspace Group used standard auditing or review techniques and developed specific checklists for this audit (or program review). The team performed operational observations and interviewed service provider’s management personnel. *<Insert any additional methods used>*. The team focused on *(insert number)* different areas:

(2) Results.

(a) Describe the results for *each* focus area and list any findings or observations.

1. Description. Provide a general description of the focus area.

Example: Focus Area: [Insert focus area e.g., criteria, documentation, or training. Document each area separately.]

2. Methodology. Describe specific methodology used, e.g. observed procedure design operation, reviewed *XX* training records, interviewed service provider’s management, etc.

3. Requirements. Describe the processes, processes, procedures, and/or specific requirements.

4. Findings. Provide a detailed description of the non-compliance. Include the safety compliance issue number, if applicable. If there were no instances of non-compliance state, “We did not find any non-compliance with requirements relating to this focus area.” Continue sequential numbering throughout the audit or program review report as necessary, regardless of the focus area. Follow instructions above for each finding.

5. Observations. Provide a detailed description of the observation or state, “There are no observations for this focus area.” Continue sequential numbering throughout the audit or program review report as necessary, regardless of the focus area.

6. Appendix A. List all team members and identify the team leader.

7. Appendix B. Attach the audit or program review requirements checklist. Electronic mailing can be used if there are several checklists.

d. Audit or program review report cover letter. The team leader prepares the cover letter to accompany the report using the Audit or Program Review Report Cover Letter template (Figure B-15). This letter addresses observations both positive and negative and must list any informal and formal safety compliance issues.

Note: If the informal safety compliance issue was identified during an audit or program review, the audit or program review report cover letter will initiate the informal compliance process. The letter requests service provider response within 15 business-days from the date of the letter or by the due date assigned by the designated manager.

e. Submission of audit report to the Division Manager. After receiving approval from the designated manager, the administrative assistant submits the audit or program review report with the report cover letter (if applicable) and any required attachments to the division manager for signature. The division manager must receive the audit or program review report within 21 calendar-days after audit or program review conclusion. Send an interim notification to the division manager in the event that the audit or program review report is not complete within 21 calendar-days. Upon receipt from the division manager, the administrative assistant sends a copy of the signed report to the service provider. A copy of the notification letter is posted on the designated Oversight site.

3-1-6. Follow-up Activities.

a. Follow-up audit or program review. Safety critical, hazard, or compliance findings and/or negative observations requiring follow-up action are entered into the informal or formal compliance process for resolution. Requests for a follow-up audit or program review are submitted by the team leader, assigned staff specialist, or designated manager and require approval by the division manager. The request may be communicated in any manner (i.e., written request, e-mail, and memorandum). An approved follow-up audit or program review will be scheduled as determined by the designated manager.

b. Number assignments. The oversight program manager assigns a single digit sequential number after the project number (e.g., ADT-FY-20-001-1) to indicate the follow-up audit or program review. The project number and the words “Follow-up Audit” or “Follow-up Program Review” must be included on all documents and records dealing with the follow-up audit.

c. Conduct a follow-up audit or program review. The team leader will prepare team folders that include a copy of the notification (for scheduled visit only), revised requirement, and team leader checklists in accordance with paragraph 3-1-6.b, and other necessary documents. Conduct a follow-up audit or program review in accordance with paragraphs 3-1-4.a through 3-1-5.b.

d. Report follow-up audit or program review results to division manager. The team leader submits a follow-up report in accordance with paragraphs 3-1-5.c through 3-1-5.e. Include a prepared letter (if required) that initiates or closes a safety compliance issue in accordance with the compliance process.

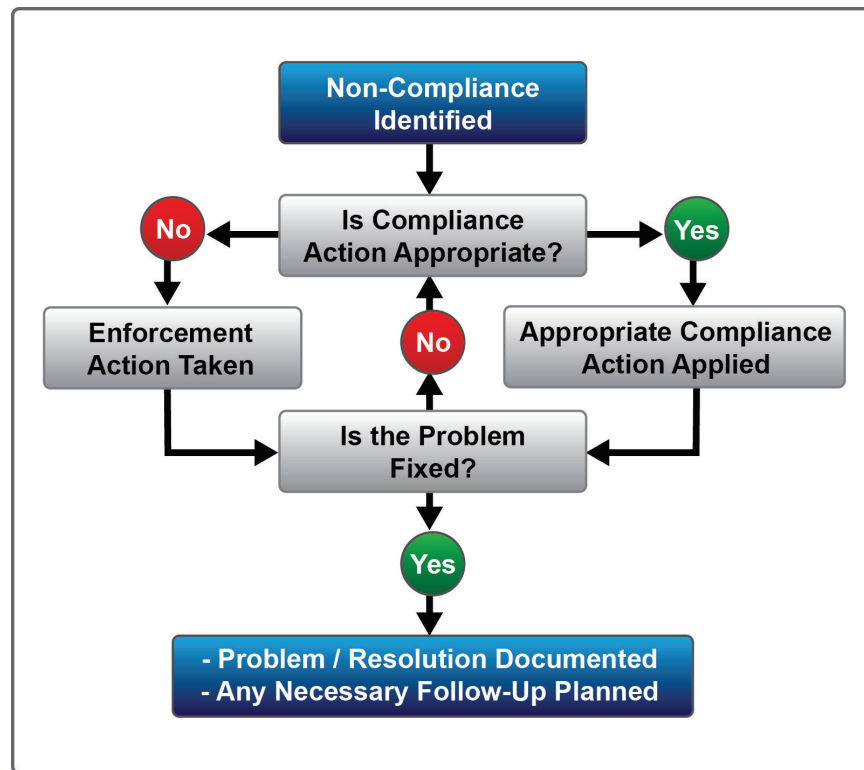
3-1-7. Record Maintenance. The oversight program manager ensures the establishment of records are in accordance with this process and entered on the designated Oversight site. Keep the following records on file:

- a.** Annual audit and program review schedule,
- b.** Audit or program review plan,
- c.** Audit or program review notification letter,
- d.** Requirements & team leader checklists,
- e.** Audit or program review process feedback form,
- f.** Audit or program review report (including cover letter, etc.),
- g.** Follow-up audit or program review report, and
- h.** All other relevant information as deemed appropriate.

Chapter 4. Compliance Process

4-1-1. General Overview. Order 2150.3, FAA Compliance and Enforcement Program, sets forth policies and procedures relevant to the FAA's compliance and enforcement program. All compliance and enforcement actions will be logged on the Safety Compliance Tracking log (Figure B-13).

Figure 4-1. Compliance Oversight Flow Chart



4-1-2. Compliance Program. Compliance action will be taken unless a determination is made that a compliance action is not appropriate (Figure 4-1). For deviations resulting from flawed procedures, simple mistakes, lack of understanding, or diminished skills the following compliance actions are appropriate:

- a. On-the-spot correction,
- b. Additional Training (including Remedial Training), on FAA Knowledge Services Network (KSN), OE/AAA, IFPV activities,
- c. Other actions to correct the deviation and prevent recurrence.

4-1-3. Enforcement Action. Enforcement Action is required for the following and will be processed according to Order 2150.3:

- a. Intentional or reckless deviations,

- b.** Unwillingness or inability to comply,
- c.** Certain matters involving lack of qualification (i.e., lack of care, judgement, or responsibility),
- d.** Enforcement required by regulation or law, and
- e.** Failure to complete corrective action.

Appendix A. Administrative Information

1. Distribution. This order is distributed electronically only.

2. Definitions.

a. Audit. A systematic and documented process for determining an IFP service provider's compliance with legal, regulatory, and statutory requirements of 14 CFR IFPs published in the Federal Register.

b. Departure Procedures (DP). A preplanned instrument flight rule (IFR) departure procedure published for pilot use, in graphic or textual format, that provides obstruction clearance from the terminal area to the appropriate en route structure. There are two types of DP, Obstacle Departure Procedure (ODP), printed either textually or graphically, and, Standard Instrument Departure (SID), which is always printed graphically.

c. Diverse vector area (DVA). An area in which a prescribed departure route is not required. Radar vectors may be issued below the minimum vectoring or minimum IFR altitude. It can be established for diverse departure, departure sectors, and/or video map radar areas portraying obstacles and terrain.

d. Instrument Approach Procedure (IAP). A series of predetermined maneuvers for the orderly transfer of an aircraft under instrument flight conditions from the beginning of the initial approach to a landing or to a point from which a landing may be made visually. It is prescribed and approved for a specific airport by competent authority.

e. Instrument Flight Procedure. A charted flight path defined by a series of navigation fixes, altitudes, and courses provided with lateral and vertical protection from obstacles from the beginning of the path to a termination point. IFPs can be DPs, Standard Terminal Arrival Routes (STARs), and IAP.

f. IFP Service Provider. IFP Service Provider is an entity that provides public and special use IFP development services.

g. Program Review. A review and verification of an IFP service provider's compliance with policies, processes, and practices for managing all aspects of IFP design. Special Instrument Procedures are not published in the Federal Register.

h. Operations Manual. The organization must have a FAA-accepted (Flight Technologies and Procedures Division's representative) Operations Manual. The Operations Manual must contain items listed in AC 90-110.

i. Oversight site. Internal Flight Procedures and Airspace Group's designated website hosted on the Knowledge Services Network (KSN).

j. Safety Management System. SMS is the formal, top-down, organization-wide approach to managing safety risk and assuring the effectiveness of safety risk controls. It includes systematic procedures, practices, and policies for the management of safety risk.

k. Special Instrument Procedure (Special). Special instrument approach procedures are approved by the FAA for individual operators but are not published in 14 CFR part 97 for public use.

Note: Do not designate off-airway non-part 95 routes as special routes even though associated with special instrument approach procedures (use Form 8260-16, Transmittal of Airways/Routes Data Record, to forward IFR off-airway data to Aeronautical Information Group).

l. Standard Instrument Approach Procedure (SIAP). U.S. civil standard instrument approach procedures are approved by the FAA as prescribed under 14 CFR part 97 and are available for public-use.

m. Standard Terminal Arrival Route. STAR is a preplanned IFR air traffic control arrival procedure published for pilot use in graphic and/or textual form. STARs provide transition from the en route structure to an outer fix or an instrument approach fix/arrival waypoint in the terminal area.

n. Team/Team Leader. The Flight Procedures and Airspace Group's designated manager assigns an individual as the team leader based on experience. Additional team members are coordinated amongst designated managers and identified on the plan (typically includes specialists comprising the PRB). If only one individual is assigned to travel, team member(s) and designated subject matter experts will assist remotely.

3. Related Publications (current editions).

- AC 90-100, U.S. Terminal and En Route Area Navigation (RNAV) Operations
- AC 90-101, Approval Guidance for RNP Procedures with AR
- AC 90-105, Approval Guidance for RNP Operations and Barometric Vertical Navigation in the U.S. National Airspace System and in Oceanic and Remote Continental Airspace
- AC 90-110, Instrument Flight Procedure Service Provider Authorization Guidance for Space-based Instrument Flight Procedures
- AC 90-112, Development and Submission of Special Instrument Procedures to the FAA
- AC 90-113, Instrument Flight Procedure Validation (IFPV) of Performance Based Instrument Flight Procedures (IFP)
- Order 1050.1, Environmental Impacts: Policies and Procedures
- Order 2150.3, FAA Compliance and Enforcement Program
- Order JO 7400.2, Procedures for Handling Airspace Matters
- Order JO 7930.2, Notices to Airmen

- Order 8200.1, United States Standard Flight Inspection Manual
- Order 8260.3, United States Standard for Terminal Instrument Procedures (TERPS)
- Order 8260.19, Flight Procedures and Airspace
- Order 8260.26, Establishing Submission Cutoff Dates for Civil Instrument Flight Procedures
- Order 8260.42, United States Standard for Helicopter Area Navigation
- Order 8260.43, Flight Procedures Management Program
- Order 8260.46, Department Procedure (DP) Program
- Order 8260.58, United States Standard for Performance Based Navigation (PBN) Instrument Procedure Design
- Order 8260.60, Special Instrument Procedures
- Order 8900.1, Flight Standards Information Management System
- RTCA DO-236C, Minimum Aviation System Performance Standards: Required Navigation Performance for Area Navigation

4. Authority. The current editions of the following publications provide Flight Standards the authority and/or guidance to provide IFP service provider oversight:

- Order FS 1100.1, Flight Standards Service Organizational Handbook
- Order VS 1100.2, Managing Aviation Safety (AVS) Delegation Programs
- Order 2150.3, FAA Compliance and Enforcement Program
- Order 8000.72, FAA Integrated Oversight Philosophy
- Order VS 8000.367, Aviation Safety (AVS) Safety Management System Requirements
- Order 8000.368, Flight Standards Service Oversight
- Order 8000.369, Safety Management System
- Order VS 8000.370, Aviation Safety (AVS) Safety Policy
- Order 8000.373, Federal Aviation Administration Compliance Program
- Order 8260.19, Flight Procedures and Airspace

Appendix B. Audit or Program Review Figures and Forms

Figure B-1. Form 8260-31, Annual Audit and Program Review Schedule

[illegible]

Figure B-2. Audit and Program Review Tracking Log

SAMPLE AUDIT & PROGRAM REVIEW TRACKING LOG

[illegible]

**Figure B-3. Form 8260-32, Audit or Program
Review Requirements Checklist**

FEDERAL AVIATION ADMINISTRATION FLIGHT STANDARDS SERVICE AUDIT OR PROGRAM REVIEW REQUIREMENTS CHECKLIST		
<hr/>		
Project Number:	Date(s):	
Facility:	Location:	
<hr/>		
Checklist Number:	<div style="border: 1px solid black; padding: 2px; display: inline-block;">- +</div>	
Requirements:		
<hr/>		
Checklist Questions	Compliance verified?	Evidence and/or Observations
	<input type="radio"/> Yes <input type="radio"/> No	<div style="border: 1px solid black; padding: 2px; display: inline-block;">+ -</div>
<hr/>		
Sampling Methods:		
<hr/>		
Additional Comments:		
<hr/>		

Figure B-4. Audit or Program Review Plan

FAA
Flight Procedures & Airspace Group

Audit or Program Review Plan

Instructions: Upon completion, forward the audit or program review plan to the section manager for review/approval. Retain the original approved plan in the audit or program review folder (as appropriate) and place a copy on the Oversight site.

Service Provider	Insert title of service provider (i.e., Alaska Airlines)												
Project Number	ADT or RVW-FYXX-XXX												
Requester	Insert name of team leader or oversight program manager												
Team	Insert name of team leader Insert names of team members Insert name of sub-team leader for each sub-team Insert names of sub-team members												
Schedule (Anticipated)	<table border="1"> <tr> <td>Project start date</td> <td>Insert Date</td> </tr> <tr> <td>Notification letter due to the service provider</td> <td>Insert Date</td> </tr> <tr> <td>On-site start date</td> <td>Insert Date</td> </tr> <tr> <td>On-site completion date</td> <td>Insert Date</td> </tr> <tr> <td>Estimated project conclusion date (7 calendar days after all data is collected)</td> <td>Insert Date</td> </tr> <tr> <td>Final report due to division manager (21 calendar days after conclusion date)</td> <td>Insert Date</td> </tr> </table>	Project start date	Insert Date	Notification letter due to the service provider	Insert Date	On-site start date	Insert Date	On-site completion date	Insert Date	Estimated project conclusion date (7 calendar days after all data is collected)	Insert Date	Final report due to division manager (21 calendar days after conclusion date)	Insert Date
Project start date	Insert Date												
Notification letter due to the service provider	Insert Date												
On-site start date	Insert Date												
On-site completion date	Insert Date												
Estimated project conclusion date (7 calendar days after all data is collected)	Insert Date												
Final report due to division manager (21 calendar days after conclusion date)	Insert Date												

Figure B-4. Audit or Program Review Plan (Continued)**Objective**

The objective is to determine service provider compliance with procedures, requirements and standards with (insert the topic).

Scope

The scope describes the purpose and parameters of the audit or program review.

Focus Areas

The focus areas are the specific areas the team will concentrate on to determine service provider compliance. Do not use bullets.

Methodology

Use the following type of sentence (edited appropriately for your audit or program review) to describe the methodology. The team will interview the service providers' management, review records, and observe operations.

Applicable Regulations or Statutes

Insert the appropriate FAA orders, directives, notices, etc. as applicable. Use a bullet list if there are two or more items.

Date(s) and Facilities

On-Site Location(s)	Anticipated Date(s)	Name & Location
	Insert Date(s)	Insert service provider name and address

Justification for Location(s)

In this section, include a description of the reason(s) for selecting the service provider(s) for an audit or program review. This rationale may include, but is not limited to the following:

- *Specific surveillance items associated with the system or procedure.*
- *Likelihood and severity of incidents or accidents associated with the system or procedure.*
- *Number of incidents or complaints reported (high, medium, low) related to the system or procedure.*

Figure B-4. Audit or Program Review Plan (Continued)**Review and Approval Sign-Off Sheet**

Team Leader _____ Date _____
(Type the Name and Routing)

Section Manager _____ Date _____
(Type the Name and Routing)

Figure B-5. Notification Letter

U.S. Department
of Transportation
**Federal Aviation
Administration**

Aviation Safety

800 Independence Ave., SW.
Washington, DC 20591

[Name, title, company, address, city, state and zip code]

Subject: [Audit, Program Review or Initial Qualification Audit] of [Helicopter] Instrument Flight Procedure (IFP) Development Program

Dear Mr./Ms. (Name as appropriate)

The Federal Aviation Administration (FAA), Flight Standards Service, Flight Procedures and Airspace Group will conduct [an audit or a program review] of [service provider name] IFP program. The [audit or a program review] is scheduled for [date(s)] at the address shown above for your company.

Note: For Initial Qualification Audits, use the following:

In response to your request to become authorized by the FAA to develop Title 14 Code of Federal Regulations Part 97 (14 CFR 97), as outlined in FAA Advisory Circular (AC) Number 90-110, Instrument Flight Procedure Service Provider Authorization Guidance for Space-based Instrument Flight Procedures we will be conducting an initial on-site qualification audit of your Flight Procedure Development Program. This audit is scheduled for [date(s)] at the address shown above for your company.

Note: For an Audit, use the following:

The objective of this audit is to review your standards of practice against guidance as outlined in AC 90-110, Instrument Flight Procedure Service Provider Authorization Guidance for Space-based Instrument Flight Procedures and other guidance applicable to public and special procedure development and maintenance. Standard audit procedures will be used to include interviews and a review of your company's programs and manuals.

Note: For a Program Review, use the following:

The objective of this program review is to review your standards of practice against guidance as outlined in Advisory Circular 90-112, Development and Submission of Special Instrument Procedures to the FAA.

We would like an initial meeting with you at [time and date]. The purpose of this meeting is to introduce the team, explain the [audit or program review] process, and ensure that company personnel are familiar with FAA's process and regulatory responsibilities.

Should you require any further information regarding this upcoming [audit or program review], please contact [Inspector name, Flight Procedures & Airspace Group, at phone number, or e-mail].

Sincerely,

[Division manager's name, title, routing]

Figure B-6. Form 8260-33.1, Team Briefing Checklist

FEDERAL AVIATION ADMINISTRATION FLIGHT STANDARDS SERVICE TEAM BRIEFING CHECKLIST		
1. Confirm the facilities for the	<input type="checkbox"/>	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A
2. Confirm dates of the	<input type="checkbox"/>	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A
3. Confirm the objective and scope.		<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A
4. Identify timetables for Opening Meeting, Closing Meeting, Team Briefings.		<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A
5. Discuss sampling techniques to be deployed.		<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A
6. Ensure that work documents and team folders are complete.		<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A
7. Confirm team members' roles and responsibilities (general/review).		<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A
8. Discuss how to handle conflict resolution:		
a. Present issues to team leader.		<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A
b. Team leader makes final decision and communicates to all concerned.		<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A
9. Ensure that all team members are aware of the following:		
a. Professional care in handling customer supplied products.		<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A
b. Storage and protection of review materials.		<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A
c. Issues of confidentiality.		<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A
d. Issues involving conflict of interest.		<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A
10. Discuss professionalism.		
a. Professional care in handling customer supplied products.		<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A
b. Appropriate dress attire, turn off cell phone (or put on vibrate), and responding to inquiries.		<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A
11. Confirm transportation, lodging, and logistical information.		<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A

Team Leader: _____

Date: _____

Project Number: _____

Facility: _____

Figure B-7. Form 8260-33.2, Opening Meeting Checklist

**FEDERAL AVIATION ADMINISTRATION
FLIGHT STANDARDS SERVICE
OPENING MEETING CHECKLIST**

An opening meeting will be held with the service provider's management or, when appropriate, those responsible for the requirements or procedures to be audited or reviewed. The team leader is responsible for leading the opening meeting. The purpose of this meeting is for the team leader to accomplish the following:

1. Introduce team members to the service provider. ☐ Yes ☐ No ☐ N/A
2. State the objective and scope.
 - a. Inform the service provider that the scope may be expanded if warranted. ☐ Yes ☐ No ☐ N/A
3. Discuss how the process will be conducted - team members will:
 - a. Review requirements, records, and interview management. ☐ Yes ☐ No ☐ N/A
 - b. Observe operational procedures and personnel; and/or ☐ Yes ☐ No ☐ N/A
 - c. Take notes and gather/document objective evidence. ☐ Yes ☐ No ☐ N/A
4. Inform that findings will be provided verbally at the closing meeting. ☐ Yes ☐ No ☐ N/A
5. Inform that safety critical findings will be elevated immediately to division management by the team leader and referred to the Formal Compliance Process for tracking and resolution. ☐ Yes ☐ No ☐ N/A
6. Confirm program review timetables and other logistics:
 - a. Confirm times and dates of briefings and closing meeting. ☐ Yes ☐ No ☐ N/A
 - b. Ensure that personnel are available to accomplish review objectives. ☐ Yes ☐ No ☐ N/A
 - c. Ensure a conference room or area with telephone and internet access is provided for the team's use during the review. ☐ Yes ☐ No ☐ N/A
7. Identify the service provider's point(s) of contact. ☐ Yes ☐ No ☐ N/A
8. Inquire about on-site safety, emergency, and security procedures ☐ Yes ☐ No ☐ N/A

Team Leader: _____

Date: _____

Project Number: _____

Facility: _____

Figure B-8. Form 8260-33.3, Closing Meeting Checklist

**FEDERAL AVIATION ADMINISTRATION
FLIGHT STANDARDS SERVICE
CLOSING MEETING CHECKLIST**

A closing meeting, chaired by the team leader, will be held to present observations and/or findings in such a manner that the service provider understands them. Participants should include the service provider's management and/or those responsible for the requirements or procedures.

1. Extend participation to the service provider for their cooperation and assistance. ☐ Yes ☐ No ☐ N/A
2. Reiterate the objective and scope. ☐ Yes ☐ No ☐ N/A
3. Describe the verification methods used during the ☐ Yes ☐ No ☐ N/A
4. Present results of the ☐ Yes ☐ No ☐ N/A
 - a. Positive aspects of the ☐ Yes ☐ No ☐ N/A
 - b. Observations and whether they require follow-up. ☐ Yes ☐ No ☐ N/A
 - c. Safety critical, safety compliance issues, and other findings. ☐ Yes ☐ No ☐ N/A
5. Inform the service provider that the final report will be distributed within 21 calendar days from the conclusion of the ☐ Yes ☐ No ☐ N/A
 - a. If additional information is needed, the team leader will notify the section manager. ☐ Yes ☐ No ☐ N/A
 - b. The review is conducted seven calendar days after all data is collected. ☐ Yes ☐ No ☐ N/A
7. Close out any logistics and security matters. ☐ Yes ☐ No ☐ N/A
8. Provide the service provider with the ☐ Yes ☐ No ☐ N/A
 - a. Process Feedback form.

Team Leader: _____

Date: _____

Project Number: _____

Facility: _____

Figure B-9. Form 8260-33.4, Opening and Closing Meeting Attendance

**FEDERAL AVIATION ADMINISTRATION
FLIGHT STANDARDS SERVICE
OPENING AND CLOSING MEETING ATTENDANCE**

<u>Opening Meeting:</u>			<u>Closing Meeting:</u>	
<u>Project Number:</u>			<u>Facility:</u>	
<u>Name</u>	<u>Organization</u>	<u>Contact Number</u>	<u>Opening Meeting</u>	<u>Closing Meeting</u>
<div style="border: 1px solid black; display: inline-block; padding: 2px 5px;">- +</div>				

USE SEPARATE SHEET FOR EACH FACILITY USED

Figure B-10. Form 8260-34.1, Audit Process Feedback

FEDERAL AVIATION ADMINISTRATION FLIGHT STANDARDS SERVICE AUDIT PROCESS FEEDBACK FORM		
Project Number:		Date(s):
Ratings: 5 = Strongly Agree 4 = Agree 3 = Neutral 2 = Disagree 1 = Strongly Disagree N/A = Not Applicable		
PERFORMANCE ITEM <i>Please rate AFS-420's performance on the following items:</i>	RATING <i>Rate 1 (low) to 5 (high) or N/A</i>	COMMENTS <i>Place any specific comments below.</i>
Advance notification of the Audit is required. Please specify the number of days prior to the Audit that the notice was received.	<input type="text"/>	
The opening meeting was informative and beneficial.	<input type="text"/>	
The objectives and scope were communicated in a clear and concise manner.	<input type="text"/>	
The Audit team communicated their requests during the process clearly and concisely.	<input type="text"/>	
The closing meeting was beneficial and met your expectations.	<input type="text"/>	
The Audit team was objective and unbiased through-out the process. If not, please explain.	<input type="text"/>	
The Audit team members were courteous and respectful.	<input type="text"/>	
What aspects of AFS-420's Audit would you recommend changing?		
What aspects of AFS-420's Audit do you consider most noteworthy?		
Additional Comments:		
COMPLETED BY: THIS INFORMATION IS OPTIONAL		
Name:		Title:
Signature:		Date:

Please Return the Audit Feedback form to 9-amc-fsifp-oversight@faa.gov

Figure B-11. Form 8260-34.2, Program Review Process Feedback

FEDERAL AVIATION ADMINISTRATION FLIGHT STANDARDS SERVICE PROGRAM REVIEW PROCESS FEEDBACK		
Project Number:		Date(s):
Ratings: 5 = Strongly Agree 4 = Agree 3 = Neutral 2 = Disagree 1 = Strongly Disagree N/A = Not Applicable		
PERFORMANCE ITEM <i>Please rate AFS-420's performance on the following items:</i>	RATING <small>Rate 1 (low) to 5 (high) or N/A</small>	COMMENTS <i>Place any specific comments below.</i>
Advance notification of the Program Review is required. Please specify the number of days prior to the Program Review that the notice was received.	▼	
The opening meeting was informative and beneficial.	▼	
The objectives and scope were communicated in a clear and concise manner.	▼	
The Program Review team communicated their requests during the process clearly and concisely.	▼	
The closing meeting was beneficial and met your expectations.	▼	
The Program Review team was objective and unbiased through-out the process. If not, please explain.	▼	
The Program Review team members were courteous and respectful.	▼	
What aspects of AFS-420's Program Review would you recommend changing?		
What aspects of AFS-420's Program Review do you consider most noteworthy?		
Additional Comments:		
COMPLETED BY: THIS INFORMATION IS OPTIONAL		
Name:		Title:
Signature:		Date:

Please Return the Program Review Feedback form to 9-amc-fsifp-oversight@faa.gov

Figure B-12. Feedback Tracking Log

SAMPLE FEEDBACK TRACKING LOG

[illegible]

Figure B-13. Safety Compliance Tracking Log

SAMPLE SAFETY COMPLIANCE TRACKING LOG

[illegible]

Figure B-14. Audit or Program Review Report



FAA
Flight Technologies and Procedures Division

[Review Report]
Flight Procedures and Airspace Group

[Service Provider]

[Project Number]

[Date]

Mark Steinbicker
Manager, Flight Technologies and Procedures Division

Date

Figure B-14. Audit or Program Review Report (Continued)**1. Introduction.****a. Background.**

[Reason for the audit or program review.]

b. Objective.

[Same objective as the audit or program review plan.]

c. Scope.

[Same scope as the audit or program review plan.] [List audit or program review date(s) and location(s).]

d. Requirements.

[Indicted source of requirements, e.g., orders, notices, etc.] [List requirements in bullett format]

e. Methodology.

[Insert the tools and techniques used to conduct the audit or program review.]

2. Audit or Program Review Results**a. Focus Area.**

[Insert focus area e.g., criteria, documentation, or training. Document each area separately.]

(1) Description.

[Provide a general description of the focus area.]

(2) Methodology.

[Describe the specific methodology used.]

(3) Requirements.

[Describe the processes, procedures, and/or specific requirements related.]

(4) Finding.

[Provide a detailed description of the non-compliance. Include the safety compliance issue number, if applicable. If there were no instances of non-compliance state "There were no instances of non-compliance relating to this focus area."]

Figure B-14. Audit or Program Review Report (Continued)

[Continue sequential numbering throughout the (audit or program review report as necessary, regardless of the focus area. Follow instructions above for each finding.]

(5) Observations.

[Provide a detailed description of the observation or state "There are no observations relating to this focus area."] [Continue sequential numbering throughout the (audit or program review) report as necessary, regardless of the focus area.]

b. Appendix A.

[Insert name of all team members and identify team leader.]

c. Appendix B.

[Audit Requirements Checklist: See attachment.]

Figure B-15. Audit or Program Review Report Cover Letter

U.S. Department
of Transportation
**Federal Aviation
Administration**

Aviation Safety

800 Independence Ave
Washington, DC 20591

[Date]

[Name]

[Company]

[Address]

[City, ST Zip Code]

Subject: [Audit or Program Review] of [Name of Service Provider]

Dear Mr. Ms. [Name as appropriate]:

The Flight Procedures & Airspace Group conducted an [audit or program review] on [date(s)] to determine [name of service provider] compliance with requirements for [audit title]. Because of this [audit or program review], the following safety compliance issues were identified.

FORMAL SAFETY COMPLIANCE ISSUES

COMP-FYXX-XX: [Include a brief description of the formal safety compliance issue and state that a Notice of Investigation has been issued on [insert date]. Continue for each formal safety compliance issue.]

INFORMAL SAFETY COMPLIANCE ISSUES

COMP-FYXX-XX: [Include a brief description of each informal safety compliance issue. Continue for each informal safety compliance issue.]

Please respond to all informal compliance issues within 21 calendar days [or due date assigned by the section manager] from the date of this letter. Include a point of contact and outline your company's plan to correct the safety compliance issues. Send your response to:

[Section manager's name]

[Title and routing]

[Address]

[City, ST Zip Code]

If you have any questions, please contact [section manager's name] by phone [number] or E-mail at [e-mail address].

Sincerely,

[Division Manager's name]

[Title, Office Name]

Enclosure or Enclosures (#)

Directive Feedback Information

Please submit any written comments or recommendation for improving this directive, or suggest new items or subjects to be added to it. Also, if you find an error, please tell us about it.

Subject:

To:

(Please check all appropriate line items)

- ☐ An error (procedural or typographical) has been noted in paragraph ___ on page _____
- ☐ Recommend paragraph _____ on page _____ be changed as follows:
(attached separate sheet if necessary)
- ☐ In future change to this order, please include coverage on the following subject *(briefing describe what you want added)*
- ☐ Other comments:
- ☐ I would like to discuss the above. Please contact me.

Submitted by: _____ Date: _____

Telephone Number: _____ Routing Symbol: _____

Submit this form to:

[FAA, Flight Standards Service, Flight Technologies and Procedures Division](#)
P.O. Box 25082, Oklahoma City, OK 73125