

**Attachment 006 to Appendix R: Air Navigation Service Provider  
Security/Inspection Audit Report Checklist**

CASSOA LOGO	<p align="center">CASSOA <b>MODEL CHECKLIST:</b></p> <p align="center"><b>AIR NAVIGATION SERVICE PROVIDER SECURITY AUDIT/INSPECTION REPORT CHECKLIST CASSOA- CL- 006</b></p>	Revision: 0
Document No: CL/006/2017	Air Navigation Service provider Security Audit/Inspection Report Checklist	
	NAME OF THE ANSP PROVIDER	
	ADDRESS: FAX: TEL. NO: EMAIL:	
	DATE(S) OF AUDIT/INSPECTION	
	OPERATOR'S LIAISON OFFICER	
	AUDIT TEAM 1. TEAM LEADER: 2. TEAM MEMBER(S):	
BRIEFINGS		In brief:
		Debrief:

<p><i>Assessment Code:</i></p> <p><b>Category 1:</b> Meets a regulatory requirement of the Civil Aviation Security Regulations, 2016 or provision of the NCASP. Recommendations may be made to further enhance measures or to address any problems linked to the quality of implementation.</p> <p><b>Category 2:</b> Does not meet a regulatory requirement of the Civil Aviation Security Regulations, 2016 or provision of the NCASP. A category 2 item represents a minor need for improvement for compliance to be achieved. In this case, improvement is necessary to ensure proper implementation of this regulatory requirement of the Civil Aviation Security Regulations, 2016 or provision of the NCASP and action should be taken by the Operator.</p> <p><b>Category 3:</b> Does not meet a regulatory requirement of the Civil Aviation Security Regulations, 2016 or provision of the NCASP. A category 3 item represents a serious need for improvement for compliance to be achieved. In this case, improvement is essential to correct the deficiencies and to comply with the regulatory requirement of the Civil Aviation Security Regulations, 2016 or provision of the NCASP. The Operator should give high priority to corrective action.</p> <p><i>Not confirmed (N/C).</i></p> <p><i>Not applicable (N/A).</i></p>
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	ITEMS	ASSESSMENT					OBSERVATION
		Cat 1	Cat 2	Cat 3	N/C	N/A	
<b>ORGANIZATION AND ADMINISTRATION</b>							
<b>Allocation of Responsibilities</b>							
i.	Nomination of a person in charge/responsible for aviation Security.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
ii.	Establishment of a written and approved operator security programme.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
iii.	Procedures for recruitment and selection of security personnel	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
iv.	Establishment of a written and approved Operator security Training Programme.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
v.	Training and certification of security personnel	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
vi.	Internal Security Quality Control	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
vii.	Availability of additional measures for access to ATS facility	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
viii.	Procedures for control of airline uniforms ( protection/issue /withdarawa1 procedures)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Recommendation(s)							

	ITEMS	ASSESSMENT					OBSERVATION
		Cat 1	Cat 2	Cat 3	N/C	N/A	
2	<b>PHYSICAL SECURITY AND ACCESS CONTROL TO ATSP FACILITIES</b>						
i.	measures for denial of access to unauthorized personnel from physically accessing a building, resource, or stored information	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
ii.	Has the entity carried out risk and vulnerability assessments for each facility, as well as an impact analysis of the consequences of a light, medium, or severe disruption of service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
iii.	Measures for protection of the NAVAIDS located within the perimeter of the airport, close to the airport, or in remote locations.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
iv.	additional protective devices and measures to detect potential attacks against NAVAIDS located close to the airport but outside the perimeter	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
v.	Are the NAVAIDS adequately protected by physical security measures and intrusion detection systems?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
vi.	If no, are there Records of visits to the NAVAIDS facility by the authorised staff for purposes of security?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	Recommendations(s)						
3	<b>RESPONSE TO ACTS OF UNLAWFUL INTERFERENCE</b>						
i.	Establishment of a written Contingency plan.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
ii.	The unit or units to which the responsibility for temporary provision of air traffic services should be transferred	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
iii.	The means and methods of notifying the unit(s) mentioned in ii) and of transferring essential flight data to such units;	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
iv.	The means and methods of notifying aircraft in flight of the situation and of the procedures to be applied by them	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

	ITEMS	ASSESSMENT					OBSERVATION
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v.	The means and methods of notifying aircraft on the ground and operators of the situation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
vi	Resumption of normal activities following elimination or cancellation of the bomb threat, including the means and methods of issuing orders for such resumption	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
vii.	Carrying out of regular security exercises to test preparedness to security emergencies	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
viii.	Procedures for expedient reporting of security incidents	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	Recommendation(s)						

**ANALYSIS OF THE RESULTS:**

**Recommendation(s)**