

	<p align="center">TANZANIA CIVIL AVIATION AUTHORITY</p> <p align="center">DIRECTORATE OF SAFETY REGULATIONS</p>	<p align="center">Revision: 1</p> <p align="center">Form</p>
<p>DocumentNo: TCAA/FRM/SR/GEN-12A</p>	<p align="center">Title: Corrective Action Request (CAR) Form</p>	<p align="center">Page 1 of 1</p>

Finding No:	Name of Operator/Service Provider:	Level of Finding: <input type="checkbox"/> Level I <input type="checkbox"/> Level II <input type="checkbox"/> Level III
Date of Audit:	Area Audited:	
Description Of Finding/deficiency:		
Corrective Action Plan, Root Cause and Risk Assessment of the corrective action Plan to be submitted by <i>(The time frame shall be determined by the Level of finding/deficiency)</i>		
Name of Inspector(s):	Signature:	Date:
<p>Note:</p> <p><i>The description of deficiency Levels on safety.</i></p> <p><i>Level I - (Serious Finding) requires immediate action by the operator/service provider,</i></p> <p><i>Level II- (Major Finding) requires corrective action to be taken within 30 days from the identification date and</i></p> <p><i>Level III- (Minor Finding) requires corrective action to be taken within 90 days from the identification date.</i></p>		