



<b>SUSPECTED UNAPPROVED PARTS REPORT</b>			
Refer to Appendix for instructions on how to complete this form.			
1. Date the Part Was Discovered:		2. Part Name:	
3. Part Number:		4. Part Serial Number:	
5. Quantity:	6. Assembly Name:		7. Aircraft make & model:
	Assembly Number:		
8. Name, Address, and Description of the Company or Person Who Supplied or Repaired the Part:			
Name:		Street Address:	
City:	State:		ZIP Code:
Country:		Phone Number:	
Check One of the Following Applicable to the Company or Person Who Supplied or Repaired the Part:			
<input type="checkbox"/> Air Carrier – Certificate #		<input type="checkbox"/> Supplier	
<input type="checkbox"/> Mechanic – Certificate #		<input type="checkbox"/> Production Approval Holder	
<input type="checkbox"/> Repair Station – Certificate #		<input type="checkbox"/> Manufacturer	
<input type="checkbox"/> Distributor		<input type="checkbox"/> Other	
<input type="checkbox"/> Owner/Operator		<input type="checkbox"/> Unknown	
9. Description of the Issue:			
10. Name and Address of (the Company or Person) Where the Part Was Discovered:			
Name:		Street Address:	
City:	State:		ZIP Code:
Country:		Phone Number:	
Check One of the Following Applicable to the Company or Person Who Discovered the Part:			
<input type="checkbox"/> Air Carrier - Certificate #		<input type="checkbox"/> NCAA Inspector	
<input type="checkbox"/> Mechanic - Certificate #		<input type="checkbox"/> DOT/Office of Inspector General	
<input type="checkbox"/> Repair Station - Certificate #		<input type="checkbox"/> Defense Criminal Investigation Service	
<input type="checkbox"/> Distributor		<input type="checkbox"/> Other Government Agency	
<input type="checkbox"/> Supplier		<input type="checkbox"/> Foreign Civil Aviation Authority	
<input type="checkbox"/> Production Approval Holder		<input type="checkbox"/> Owner/Operator	
<input type="checkbox"/> Unknown		<input type="checkbox"/> Other	



11. Date of This Report: <input type="checkbox"/> Check this box if you request anonymity - Do not complete blocks 13-15		
13. Name and Address of the Reporter:		
Name:	Street Address:	
City:	State:	ZIP Code:
Country:	Phone Number:	
14. <input type="checkbox"/> Check this box if you request confidentiality.		
15. <input type="checkbox"/> Check this box if you do not wish to receive an acknowledgment letter.		
16. <input type="checkbox"/> Check this box if you have attached additional information.		



## Appendix

1. Record the date the part was discovered.
2. Record the part name (or a description of the part).
3. Record the part number or identification number of the part.
4. Record the serial number on the part, if applicable.
5. Record the quantity of parts.
6. Record the assembly name and assembly number (where the part was or could be installed).

Example:

Part Name: Strut  
 Part Number: PN 12345  
 Serial Number: 678  
 Quantity: 1  
 Assembly Name: Main Landing Gear  
 Assembly Number: PN 90101112

**Note:** Record additional part numbers on page 3 or a blank sheet of paper with the following column headers:

*Part Name      Part Number      Serial Number      Quantity      Assembly Name*

*Assembly Number*

7. Record the type of aircraft the part was (or could be) installed on.
8. Record the complete name and address of the company or person who produced, repaired, and/or sold the part. Do not list a P.O. Box address unless a street address is not available.

Check the box that describes the company or person. Provide the certificate number, if known.

<i>Air Carrier</i> – A GCAA certificated company or person who undertakes directly by lease, or other arrangement, to engage in air transportation.	<i>Supplier</i> – A company or person who furnishes aircraft parts or related services, at any tier, to the producer of a product or part thereof.
<i>Mechanic</i> – A person holding an GCAA mechanic certificate with airframe and/or powerplant ratings.	<i>Production Approval Holder</i> – A company or person holding one of the following four types of NCAA production approvals: production certificate, approved production inspection system, parts manufacturer approval, or technical standard order authorization.
<i>Repair Station</i> – An GCAA-certificated repair station.	<i>Manufacturer</i> – The original equipment manufacturer (OEM.)
<i>Distributor</i> – A broker, dealer, reseller or other person or agency engaged in the sale of parts.	<i>Other</i> – Record other type of business
<i>Owner/Operator</i> – The owner or operator of an aircraft.	Unknown



9. Record a brief narrative stating why you believe the part is not approved. Include a description of the part (improper configuration, suspect marking, different material, etc.), where it was obtained, and what type of documentation was supplied with it.
10. Record the complete name and address of the location where the part was found. Check the appropriate block to reflect the affiliation of the company or person who discovered the part.
11. Record the date the this form is being submitted.
12. Check this box if you request anonymity (do not wish to provide your identity), and do not complete 13, 14 or 15.
13. Record your name, address and phone number, if desired. This information will enable the GCAA to contact you for additional information, if necessary.
14. Check this box if you request confidentiality of your personal information recorded in block 13.
15. Check this box if you do not wish to receive a letter acknowledging the GCAA's receipt of this form.
16. Check this box if you have provided additional information (photos, invoices, certification statements, etc.)

**Forward the completed Suspected Unapproved Parts Report, to the address on the header.**

**Suspected Unapproved Parts Report  
Continuation Sheet Page ( ) of ( )**

Part Name	Part Number	Serial Number	Quantity	Assembly Name	Assembly Number