

# C.A.S.E. – AIR CARRIER SECTION

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## OXYGEN VENDOR/SUPPLIER

### AUDIT CHECKLIST

	<u>YES</u>	<u>NO</u>	<u>N/A</u>
1. Is the designated area and/or separate room clean and FREE of all hydrocarbons (no storage permitted)?	_____	_____	_____
2. Is there a dedicated manifold for oxygen ONLY?	_____	_____	_____
3. Are the system operating instructions and authorized operator list posted?	_____	_____	_____
4. Is there a (8" X 16") sign WARNING – USE NO OIL" posted in the oxygen servicing area?	_____	_____	_____
5. Are required certifications and applicable specifications on file and current? (Reference DOT and MIL-O-27210 and airline requirements)	_____	_____	_____
6. Are records for filling, testing, sniffing, purity checks, cylinder test, etc. maintained and up-to-date?	_____	_____	_____
7. Is there a documented training program and is it being followed?	_____	_____	_____