

Alta Avionics, LLC
1887 South 1800 West
Woods Cross, UT 84087



CRS# ALTA-TBD
Work Order

Work Order#:	_____	A/C Reg#:	_____
Date Open:	_____	A/C Make:	_____
Date Closed:	_____	A/C Model:	_____
CompanyName:	_____	A/C Serial #:	_____
Customer:	_____	A/C TCDS:	_____
Address:	_____	A/C Time :	_____ <input type="checkbox"/> Hobbs <input type="checkbox"/> Tach <input type="checkbox"/> TT
_____	_____	Type Part 135:	<input type="checkbox"/> YES <input type="checkbox"/> NO
_____	_____	(If 'Yes', CI must obtain Carrier Ops Specs)	
Phone:	_____	HAZMAT:	<input type="checkbox"/> YES <input type="checkbox"/> NO
Email:	_____	<u>Type of Inspection Required (Form Attached)</u>	
Notes:	_____	<input type="checkbox"/> Static Pressure System (AA-MACS)	
_____	_____	<input type="checkbox"/> Altimeter System (AA-ATI)	
_____	_____	<input type="checkbox"/> Transponder System (AA-ATC-TMSI)	

Task	Describe Work Required/Accomplished	Technician	Hours

Service Bulletins Installed: _____ S/W Revisions Installed: _____

Reference Docs: _____

Preliminary Inspection. ☐ Initial Inspection. ☐ In Progress. ☐ Final Inspection ☐

Item	Make	Model	P/N On	S/N On	Purchase Order

Item	Make	Model	P/N Off	S/N Off

FAA 8130-3 Tracking Number: _____

Note: Make similar entry in aircraft logbook or permanent record, as applicable.

I certify that this aircraft has been inspected in accordance with the inspection procedures noted above and was determined to be in an airworthy condition.

Chief Inspector or designee: _____

Employee # _____