Alta Avionics, LLC

FORMS MANUAL

(FM)

CRS# JN1R0210

1887 South 1800 West

Woods Cross, UT 84087


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2 Record of Revision – Forms Manual (FM)

Revision Identification	Revision Date	Description of Revision	Repair Station Approval
1.0	5/2021	Initial Version Complete	See 'List of Effective Pages'

3 Table of Contents

4 Introduction

Alta Avionics, LLC is an avionics repair facility providing maintenance, repair, and installation of avionics systems for various types of aircraft.

This Forms Manual has been prepared in accordance with the current Code of Federal Regulations (CFR's), and the policies of Alta Avionics, LLC.

This manual contains the forms used by Alta Avionics, LLC, examples, and their method of completion, to comply with 14 CFR Part 145.

Each supervisor, inspector, and all personnel working for Alta Avionics, LLC will have access to this manual. All personnel are required to thoroughly understand its contents.

This Forms Manual is accepted by the FAA, and will be maintained in a current status at all times.

5 Manual Control

This manual will be maintained by the FAA Coordinator and will provide a hard copy OR electronic Portable Document Format (PDF) for manual access for all personnel. If an electronic manual is requested a PDF version of this manual will be by provided by link for electronic manual access for any personnel.

Any digital version of this manual will be in PDF and archived in an organized manner easily retrievable for historical record and shall be done so in such a manner so as not to interfere with the most current version of this manual. In the event of hardware failure, a hardcopy, or digital file (remote or local) will be used to restore data.

The General Manager will be notified by a department supervisor in the event this manual is not current, and valid for that department's use, and will identify needed changes using form A-MCR (Manual Change Request). A sample of this form is found in the Forms Manual. The General Manager will have the revisions found necessary, produced in a final form. The proposed revisions will be submitted to the FAA/CHDO (Federal Aviation Administration/Certificate Holding District Office) for acceptance in electronic form (pdf).

The FAA Coordinator will revise manuals as required, and explain the revisions to all employees. An entry into each employee's training record will be added after each employee has been trained to verify and acknowledge the understating of each revision. Upon approval by an authorized Repair Station representative, the repair station will commence operating within the guidelines of the new revision.

The "List of Effective Pages" will reflect the Approval/Acceptance of the current revision. A file will be maintained, showing on a continuous basis, the disposition of each manual change. The FAA/CHDO will be notified each time a revision to this manual is needed. Revised areas within the document will be identified by a vertical bar in the margin.

Revisions found "not acceptable" to the FAA/CHDO, which do not conform to applicable regulations, will be addressed by this repair station as a top priority. The identified procedure or action will cease, and acceptable changes implemented immediately. The maintenance/administrative actions that were performed under revisions found "not acceptable" by the FAA/CHDO will be addressed in the following order:

1. Safety of Flight: Aircraft operator to be notified immediately, and advised that aircraft is to remain on the ground until this repair station can correct the problem, or coordinate with another certified repair station to correct the problem.
2. Procedure/Record Keeping: Aircraft operator to be notified immediately, and advised of the problem. The operator will have the option to operate the aircraft until the problem can be corrected.
3. Problems that do not affect aircraft and/or appliances will be dealt with internally and immediately to correct them.

5.1 Additional Fixed Locations

All additional fixed locations under Alta Avionics, LLC will be supplied with a direct link to this manual on every computer terminal. Each employee will be trained on the procedure to access all the manuals during their initial training. A stored copy will be supplied to each facility in case of computer failure.

6 General Description

This section provides a summary and general description of each form or tag used by Alta Avionics, LLC. For further detail on any given form, refer to the matching, corresponding subsection in Chapter 6 "Forms". For example, for more information on Form A-ATI (Altimeter Test/Inspection) refer to section 6.2 in this General Description and/or refer to section 7.2 in Chapter 7 Forms.

Alta Avionics uses a standard nomenclature to provide succinct and easily identifiable names to the forms, tags, log entries, stickers etc that are used for normal day to day work. This nomenclature is used to help avoid confusion and provide simple correlation between the form and its function. e.g. A-WO (Work Order)

This nomenclature is described below:

1. Characters 1-2 are used to describe the 'type' of form being used.
    a. The first character is always an 'A' to describe 'Alta Avionics, LLC' and that this form is defined and used exclusively by Alta Avionics, LLC.
    b. The 2nd character (or lack of a 2nd character) describes the specific 'type' of form.
        i. No character after the 'A' indicates that this is a standard form
        e.g. A-WO (Work Order)
        ii. 'A'
        An 'A' after the initial 'A' indicates that this is an Audit form, used in Audit activities at Alta Avionics, LLC.
        e.g. AA-IA (Internal Audit)
        iii. 'L'
        An 'L' after the initial 'A' indicates that this is a Log Entry type of form used when creating log entries for work completed at Alta Avionics, LLC.
        iv. 'T'
        A 'T' after the initial 'A' indicates that this is a Tag, Sticker or Label type of form used at Alta Avionics, LLC.
2. Character 3 (or 2nd character in the case of a standard form) is a '-'(hyphen) to separate the type of form from the specific name of the form.
3. Characters after the '-' (hyphen) is a descriptive acronym for the form name and can be up to 6 characters in length.
    e.g. AA-IA
    a. AA – indicates that this is an Alta Avionics, LLC form of type Audit.
    b. IA – indicates that this is an Internal Audit (IA) form

NOTE: Forms not defined or provided by Alta Avionics, LLC will use the name of the entity that created/defined the form and then the name of the form as defined by that entity.

e.g. Form 8130-3 as provided/defined by the Federal Aviation Administration(FAA) is named as 'FAA-8130-3'.

6.1 Form A-ATC-TMSI (ATC Transponder and Mode S Inspection)

This form is used when testing and inspecting the operation of a Transponder appliance. The completed form will be added to the workorder and any appropriate records.

6.2 Form A-ATI (Altimeter Test/Inspection)

This form is used when Testing/Inspecting the condition and operation of an Altimeter as per 14 CFR Part 43, Appendix E. The completed form will be added to the workorder and any appropriate records.

6.3 Form A-CC (Certificate of Calibration)

This form is used to document the calibration of instruments/appliances that are calibrated under standards that are based on NIST standards or derived. The completed form will be added to the workorder and any appropriate records.

6.4 Form A-CLSE (Capabilities List Self-Evaluation)

This form will be used to evaluate the proposed repair station that is requesting an added capability to the Capability Manual (CM).

6.5 Form A-ETR (Employee Training Record)

This form is used to document ongoing and recurrent training of all employees of Alta Avionics LLC. Completed forms will be scanned into the appropriate employee training records.

6.6 Form A-MCR (Manual Change Request)

This form is used to request a change any of Alta Avionics, LLC manuals. This form will be completed and given to the General Manager. The manuals may be revised if deemed necessary.

6.7 Form A-RTL (Required Training Log)

This form is used to document required training for employees. This form will be completed and maintained by the employee's supervisor, showing the type, date, and who trained the employee. This form will be added to the employee's Training Records.

6.8 Form A-TECIF (Test Equipment Calibration and Inspection Form)

This form is used for inhouse equipment calibration. This form will be completed by the technician performing the calibration of the equipment, and will be signed by an inspector. The completed form will be added to any appropriate records.

6.9 Form A-WO (Work Order)

This repair station will utilize a company work order, identified by a number, containing the customer's name, date, and appropriate identification required to identify any part, unit, or aircraft. This work order will list all work that is to be accomplished, in sufficient detail, that it will be readily understandable to the workman. The work order will contain all pertinent documentation pertaining to the repair items listed on the front of the work order. The completed work order will be stored in Alta Avionics, LLC computer system.

6.10 Form A-WOC (Work Order Continuation)

This repair station will utilize a Work Order Continuation page, as necessary, to document all work and pertinent documentation pertaining to the repair items listed. The completed work order and work order continuation pages will be stored in Alta Avionics, LLC computer system.

6.11 Form AA-AFCA (Audit Findings/Corrective Action)

This form is used to document findings and corrective actions for audits. Upon completion, forms are to be electronically filed with appropriate audit in Alta Avionics, LLC computer system.

6.12 Form AA-IA (Internal Audit)

This form is used for the internal audit function of the different departments and/or areas within the company. Upon proper completion, forms are to be electronically stored in Alta Avionics, LLC computer system.

6.13 Form AL-ACMR (Log Entry – Air Carrier Maintenance Release)

This for is used for Air Carrier logbook entries upon the aircraft being released back into service. The technician will document the applicable information when completing tests/inspections, and it will be signed by an authorized inspector. This sticker is to be placed in aircraft logbook, and electronically stored.

6.14 Log AL-ATI (Log Entry – Altimeter Test and Inspection)

This sticker is used as a Log Entry for Altimeter tests and inspections. The technician will document the applicable information when completing tests/inspections per 14 CFR Parts 91.411, 91.413, 91.217, and it will be signed by an authorized inspector. This sticker is to be placed in aircraft logbook, and electronically stored.

6.15 Log AL-GAMR (Log Entry – General Aviation Maintenance Release)

This for is used for General Aviation logbook entries upon the aircraft being released back into service. The technician will document the applicable information when completing tests/inspections, and it will be signed by an authorized inspector. This sticker is to be placed in aircraft logbook, and electronically stored.

6.16 Label AT-AT (Article Tag)

This sticker/tag/label is used to identify an article with a WO and indicate that this item is or may be under warranty.

6.17 Label AT-CS (Calibration Sticker)

This sticker is used for "in-house" equipment calibration. When the calibration is completed, this sticker will be completed by the technician, and placed on the equipment.

6.18 Tag AT-LST (Locator/Status Tag)

This tag may be used to identify and/or locate parts or appliances. The Parts Inspector can attach this tag to parts or appliances to aid the technician in locating the item. When the tag is removed, it is destroyed.

6.19 Tag AT-Q (Quarantine)

This tag is placed on items to be scrapped. The technician and/or inspector will place a completed tag on parts/appliances to be scrapped. When the parts/appliances have been scrapped, and documented in the proper manner, the tag will be destroyed.

6.20 Tag AT-RAS (Removed As Serviceable)

This tag is used to identify parts or appliances. The technician will complete, and attach this tag, to equipment removed during maintenance. It will remain attached to the equipment until reinstallation, and then destroyed.

6.21 Tag AT-RFS (Repairable-For Storage)

This tag is used to identify items that are repairable, to be placed in storage. The technician and/or inspector will complete, and attach this tag, to repairable items that are going to be placed into storage awaiting repair. The tag will be removed and destroyed, when unit is repaired, and documented as serviceable.

6.22 Tag AT-RIT (Reject Item Tag)

This tag is placed on a rejected item. A technician and/or inspector will attach a properly completed tag to rejected parts. This tag will remain with the part and returned to the customer, or scrapped.

6.23 Tag AT-SLI (Shelf Life Item)

This tag will be attached to all shelf life items. This tag will be completed by the Parts Inspector, showing a Control #, and expiration date, and attached to each shelf life item. The tag will remain on each item until used, or disposed of.

6.24 Label AT-T43 (Tested Sticker)

This sticker is used for altimeter tests. When an altimeter has been tested per 14 CFR Part 43, Appendix E. The technician will complete, and place the sticker on the altimeter.

6.25 FAA Form 337 – Major Alteration or Repair

This report is required to be filed with the FAA (FSDO) upon any major alteration or repair to an aircraft. See Title 14 CFR §43.9, Part 43 Appendix B, and AC 43.9-1 (or subsequent revision thereof) for instructions and disposition of this form. This report is required by law (49 U.S.C. §44701). The completed form will be stored in Alta Avionics, LLC computer system.

6.26 FAA Form 8130-3 Airworthiness Release Certificate

This form will be attached to repaired and/or tested units that are found to be serviceable. It will be completed and signed by an authorized inspector and remain with the unit. The completed form will be stored in Alta Avionics, LLC computer system.

6.27 Format of Logbook Entries

There are multiple formats for logbook entries used by Alta Avionics, LLC They may be handwritten, or computer generated. They are completed and signed by an authorized inspector at the completion of work. They are given to the aircraft owner and will be stored in Alta Avionics, LLC computer system.

Examples of these forms can be found in the following sections

7 Forms

This section describes and provides samples the forms, log entries, tags, stickers and labels as used at Alta Avionics, LLC.

7.1 AL-ATC-TMSI : ATC Transponder and Mode S Inspection

Alta Avionics LLC 1887 S. 1800 W. Woods Cross, UT,84087 CRS# JN1R0210

ATC TRANSPONDER AND MODE S INSPECTION
14 CFR PART 43, APPENDIX F

DATE:_____ W/O #_____ TAIL #_____ S/N _____

Inspection(s) in Accordance With 14 CFR Part 43, Appendix F

Transponder #1	**Transponder #2**
Mfg. _____	Mfg. _____
Model _____	Model _____
P/N _____S/N_____	P/N _____S/N_____
Radio Reply Frequency 1087 to 1093 MHZ ☐ Mode S 1089 TO 1091 ☐	Radio Reply Frequency 1087 to 1093 MHZ ☐ Mode S 1089 TO 1091 ☐
Peak Output Power > 125 and < 500 Watts ☐	Peak Output Power > and < 500 Watts ☐
Mode S TX Power > 125 and < 500 Watts ☐	Mode S TX Power > 125 and < 500 Watts ☐
SLS 0 db ☐ 1% < Reply Rate Reply Rate (-9db) ☐ 90% > Reply	SLS 0 db ☐ 1% < Reply Rate Reply Rate (-9db) ☐ 90% > Reply
Receiver Sensitivity - 66 to -77 dbm ☐ Mode 3/A	Receiver Sensitivity -66 to -77 dbm ☐ Mode 3/A
Receiver Sensitivity - 66 to -77 dbm ☐ Mode C	Receiver Sensitivity -66 to -77 dbm ☐ Mode C
Difference ≤ 1 dbm ☐	Difference ≤ 1 dbm ☐
Receiver Sensitivity Mode S -68 TO -77 dbm 90% Reply ☐	Receiver Sensitivity Mode S -68 TO -77 dbm 90% Reply ☐
Mode S Diversity Transmission Channel Isolation [ ] > 20db (May require Antenna Isolation)	Mode S Diversity Transmission Channel Isolation [ ] > 20db (May require Antenna Isolation)
Mode S Address _____ [ ] Correct Reply	Mode S Address _____ [ ] Correct Reply
Mode S UF=0 [ ] UF=16 [ ] UF=21 [ ] Formats UF=4 [ ] UF=20 [ ] UF=24 [ ] UF=5 [ ] UF=11 [ ] DF=11[ ]	Mode S UF= 0 [ ] UF=16 [ ] UF= 21 [ ] Formats UF= 4 [ ] UF=20 [ ] UF= 24 [ ] UF= 5 [ ] UF=11 [ ] DF=11 [ ]
Mode S All Call PASS ☐ FAIL ☐	Mode S All Call PASS ☐ FAIL ☐
Antennas Secure & In Good Condition ☐	Antennas Secure & In Good Condition ☐
*SYSTEM PASSES ☐	*SYSTEM PASSES ☐

Note #1: Peak Output Power Radiated Class 1A Min 125 Watts
Class 1B Min 70 Watts
Note #2: Receiver Sensitivity Includes Additional –3dbm Allowed for Radiated Signals
THE ABOVE INSPECTION(S) PERFORMED WITH THE TRANSPONDER(S) INSTALLED IN THE AIRCRAFT.

_____
TESTED BY

***NOTE: CHECK IN BOX INDICATES PASS, BLANK BOX TEST N/A**

Tester – ID #_____

A-ATC-TMSI(05-21)

801-550-5676

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7.1.1 Instructions for Form Use : AL-ATC-TMSI : ATC Transponder and Mode S Inspection

1) Enter the date the work is performed
2) Enter the Work Order on which the work is being performed
3) Enter the aircraft registration number
4) Enter the aircraft Serial Number
5) Transponder #1 enter the name of the Manufacturer of the transponder
6) Transponder #1 enter the Model of the transponder
7) Transponder #1 enter the Part Number of the transponder
8) Transponder #1 enter the Serial Number of the transponder
9) Transponder #1; place an X in the boxes for each parameter for each corresponding test
10) Transponder #1; visually inspect the antenna in accordance with manufacturer's recommendations, place an X in the box to denote satisfactory results
11) Transponder #1; place an X in the System Pass box if all tests were satisfactory
12) Transponder #2 enter the name of the Manufacturer of the transponder
13) Transponder #2 enter the Model of the transponder
14) Transponder #2 enter the Part Number of the transponder
15) Transponder #2 enter the Serial Number of the transponder
16) Transponder #2; place an X in the boxes for each parameter for each corresponding test
17) Transponder #2; visually inspect the antenna in accordance with manufacturer's recommendations, place an X in the box to denote satisfactory results
18) Enter the name of the person performing the inspections and tests
19) Enter the test and inspection equipment Identification Number

NOTE: Not all fields always require text entry. Contact your supervisor if there are questions. In cases where data is not required, DO NOT leave blank; enter N/A.

7.2 A-ATI : Altimeter Test/Inspection

Altimerer Test/Inspection
Per 14 CFR Part 43, Appendix E

WO#_____

		MFR._____	ENCODER/ADC MFR. _____
☐	PILOT ALT.	PART # _____	PART # _____
☐	CO-PILOT ALT.	MODEL #_____	MODEL #_____
☐	STBY ALT.	S/N_____	S/N _____

Scale Error

Altitude	Norm	Stby	Tol.	Encoder	Friction	Tol.
-1,000			20		X	NA
0			20		X	NA
500			20		X	NA
1,000			20			70
1,500			25		X	NA
2,000			30			70
3,000			30			70
4,000			35		X	NA
5,000	X	X	NA	X		70
6,000			40		X	NA
8,000			60		X	NA
10,000			80			80
12,000			90		X	NA
14,000			100		X	NA
15,000	X	X	NA	X		90
16,000			110		X	NA
18,000			120		X	NA
20,000			130			100
22,000			140		X	NA
25,000			155			120
30,000			180			140
35,000			205			160
40,000			230			180
45,000			255		X	NA
50,000			280			250

Barometric Scale Error

Barometric Scale	Altitude Difference Ref.	Altitude Difference
28.10	-1727	
28.50	-1340	
29.00	-863	
29.50	-392	
29.92	0	
30.50	+531	
30.90	+893	
30.99	+974	
Tolerance = ± 25 Feet		

Hysteresis

% of Alt.	Up Reading	Down Reading
40%		
50%		
Tolerance = ± 75 Feet		

Case Leak

Case Leak @ 18,000' =
Tolerance = ± 100 Ft. Per Min.

After Effect Test

Test Set Ref	Initial Alt.	After Test
Tolerance = ± 30 Feet @ 29.92 in.hg		

Note: Maintain Altimeter at each Test Point for at least one (1) minute before reading Scale Error.
Note: The difference between the altitude displayed at the altimeter and the automatic reporting output should not exceed 125 ft
Note: Approach Friction Test Points at 750 Ft. per minute.
Note: Altitude/Feet----Pressure/Inches of mercury

N#_____ Date:_____

Tester ID # _____ Tested by:_____

Inspection Record

Preliminary	Hidden Damage	In Progress #1	In Progress #2	Final	MDR Req

A-ATI(05-21)

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7.2.1 Instructions for Use : A-ATI : Altimeter Test / Inspection

1) Enter the Work Order number on which the work is being performed
2) Place an X in the box next to the position of the Altimeter
3) Enter the name of the Manufacturer of the Altimeter
4) Enter the Part number of the Altimeter
5) Enter the Model number of the Altimeter
6) Enter the Serial Number of the Altimeter
7) Enter the name of the Manufacturer of the Encoder or Air Data Computer
8) Enter the Encoder or Air Data Computer Part Number
9) Enter the Model of the Encoder or Air Data Computer
10) Enter the Serial Number of the Encoder or Air Data Computer
11) Enter the Scale Error next to each parameter
12) Enter the Barometric Scale Error next to each parameter
13) Enter the value of Hysteresis for each parameter
14) Enter the value of the Case Leak as tested
15) Enter the values for the three (3) parameters of the After Effect following the test
16) Enter the aircraft registration number
17) Enter the date on which the Altimeter Test was completed
18) Enter the Identification number of the test equipment used
19) Enter the name of the person who performed the Altimeter Test
20) Place employee initials in the boxes for each Inspection approved

NOTE: Not all fields always require text entry. Contact your supervisor if there are questions. In cases where data is not required, DO NOT leave blank; enter N/A.

7.3 A-CC : Certificate of Calibration

Alta Avionics, Inc.
Certificate of Calibration

Manufacturer: _____
Model: _____
Description: _____
Serial Number: _____
Customer: _____
Work Order: _____

Calibration Procedure: _____
Environmental Conditions: _____

Remarks: _____

This Unit was Received ☐ In Specification ☐ Out of Specification

This certificate attests that this instrument has been calibrated under the stated conditions with standards that are traceable to the National Institute of Standards and Technology (NIST) or derived from accepted values of natural physical constants or derived by ratio type of self-calibration. Evidence of traceability is available and on file at our Facility.

Standards Utilized for this Calibration

Equip. ID	Manufacturer	Model	Serial Number	Due Date

Calibration Date: _____

Calibration Due: _____

_____
Calibrated By

CRS# JN1R0210
1887 SOUTH 1800 WEST
Woods Cross, UT 84087

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7.3.1 Instructions for Form Use: Certificate of Calibration

1. Enter the name of the manufacturer for the unit being calibrated
2. Enter the model number of the unit being calibrated
3. Enter a description (nomenclature) of the unit being calibrated
4. Enter the serial number of the unit being calibrated
5. Enter the name of the customer who submitted the unit to be calibrated
6. Enter the work order number on which the work is being performed
7. Enter a description of the calibration procedures applicable to the unit being calibrated
8. Enter a description of the environmental conditions at the time the unit was being calibrated
9. Enter remarks pertaining to the unit being calibrated
10. Annotate in the boxes provided, the status the unit was found to be upon arrival
11. List all equipment and standards used to accomplish the calibration
12. Enter the date the calibration was completed
13. Enter the next calibration due date, based on the interval prescribed for the unit being calibrated
14. Enter the name of the person who performed the calibration

NOTE: Not all fields always require text entry. Contact your supervisor if there are questions. In cases where data is not required, DO NOT leave blank; enter N/A.

7.4 A-CLSE : Capabilities List Self-Evaluation

Alta Avionics, LLC
Capabilities List Self-Evaluation Form

Description of desired capability: _____

Facility:

1. Repair station: CRS# JN1R0210, 1887 SOUTH 1800 WEST, Woods Cross, UT 84087
2. Are there adequate housing and facilities for desired capability?

☐ YES ☐ NO

Describe housing facility for desired capability: _____

Requirements:

1. Does the desired facility possess the proper tools needed for this capability?

☐ YES ☐ NO

Description of Tools needed: _____

2. Does the desired facility possess the proper equipment and materials needed for the capability?

☐ YES ☐ NO

Description of Tools needed: _____

*in the case of using equivalents, please specify.

3. Does the repair station have the proper technical data and processes?

☐ YES ☐ NO

Description of technical data and source for data: _____

4. Does the repair station have properly trained personnel?

☐ YES ☐ NO

Repair Station Acceptance: _____. Date: _____

A-CLSE (05-21) Page 1 of 1

7.4.1 Instructions for Form Use : A-CLSE : Capabilities List Self-Evaluation

1. Enter a description of the capability sought Facility;
    a. The repair station with managerial control of its satellite repair stations must hold the capability prior to that capability being held by a satellite repair station
    b. Select Yes or No, regarding housing and facilities
    c. Describe the housing and facilities which are required to support the added capability
2. Requirements;
    a. Select Yes or No, regarding the possession of proper tooling
        i. Describe the type of tooling required
    b. Select Yes or No, regarding the possession of proper equipment and materials
        i. Describe the type of equipment and materials required
    c. Select Yes or No, regarding the possession of the proper technical data required
        i. Describe the type of technical data required
    d. Select Yes or No, regarding the repair station employee for proper training
        i. Describe the type of training required
3. Acceptance;
    a. Provide the completed form to the Quality Assurance Manager
        i. The Quality Assurance Manager will sign and date the form, and present to the President for final acceptance

NOTE: Not all fields always require text entry. Contact your supervisor if there are questions. In cases where data is not required, DO NOT leave blank; enter N/A.

7.5 A-ETR : Employee Training Record

CRS# JN1R0210
1887 SOUTH 1800 WEST
Woods Cross, UT 84087

Employee Training Record

Employee Name	
Certificate Number (Repairman)	
Type of Training	
Method of Training (Classroom, Factory, OJT, ETC.)	
Length of Training (Hours)	
Location of Training	
Name of Instructor	
Date of Training	
Qualified	
Employee Signature	
Supervisor's Signature	
Training Records	Date: _____ BY: _____

A-ETR (05-21)

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7.5.1 Instructions for Form Use : A-ETR : Employee Training Record

1. Enter the full name of the Employee
2. Enter the Certificate number (A, P, A/P, Repairman, etc.)
3. Enter the type of training (e.g. OJT, Classroom, Distant, etc.)
4. Enter the duration/length of training, in hours
5. Enter the location of training (organization, facility, factory, etc.)
6. Enter the name of the qualified instructor
7. Enter the date the training occurred (the day it was completed)
8. Enter Yes, or No, denoting whether the training was successful to establish proficiency in the skill being trained
9. Apply Employee signature to the completed form
10. Apply Supervisor's signature to the completed form
11. Enter the date on which the employee Training Records were updated
12. Enter the name of the person updating the employee Training Records

NOTE: Not all fields always require text entry. Contact your supervisor if there are questions. In cases where data is not required, DO NOT leave blank; enter N/A.

7.6 A-MCR : Manual Change Request

MANUAL CHANGE REQUEST

1. Enter name of manual, page, and current revision date to be revised.

_____
_____
_____
_____

2. Enter (or attach) the new text that is proposed as a change.

_____
_____
_____
_____

3. Write a brief explanation of the reason for the change.

_____
_____
_____
_____

4. Signature:_____ Date:_____

5. Action taken regarding proposed change:

☐ ACCEPTED ☐ REJECTED ☐ MODIFIED

6. Explanation of action:

_____
_____
_____
_____

7. Approval:

Signature: _____ Date: _____
QA MANAGER

Signature: _____ Date: _____
CHIEF INSPECTOR

Signature: _____ Date: _____
GENERAL MANAGER

A-MCR (05-21) CSR# JN1R0210 Page 1 of 1

7.6.1 Instructions for Form Use : A-MCR : Manual Change Request

1. Self-explanatory
2. Self-explanatory
3. Self-explanatory
4. The employee requesting the manual change must sign
5. The employee requesting the manual change must date
6. The QA manager, Chief Inspector, or General manager will select one of the three status boxes
7. The QA manager, Chief Inspector, or General manager will outline what actions are to be taken (e.g. revise the manual, reject the request, etc.)
8. The QA manager, Chief Inspector, or General manager will sign and date the completed form

NOTE: Not all fields always require text entry. Contact your supervisor if there are questions. In cases where data is not required, DO NOT leave blank; enter N/A.

7.7 A-RTL : Required Training Log

Alta Avionics, LLC
Required Training Log

Employee Name				
Hire Date				
Position				
Initial Supervisor				
Training Type	**Frequency**	**Date**	**Instructor**	**Notes**
Drug and Alcohol Training and Testing	Initial			
Repair Station Manuals	Ongoing Test Once			
Repair Station Work Orders	As Required			
General Forms and Procedures	As Required			
Incoming Material Inspection	As Required			
Equipment and Parts Handling	As Required			
Airport Operations	As Required			
Qualified Line Technician	As Required			
Qualified Bench Technician	As Required			
Inspection Authority	As Required			
Supervisor Qualification	As Required			
FAA Coordinator	As Required			
Quality Assurance	As Required			
Chief Inspector	As Required			
Additional Optional Training	**Frequency**	**Date**	**Instructor**	**Notes**

A-RTL (05-21) CSR# JN1R0210 Page 1 of 1

7.7.1 Instructions for Form Use : A-RTL : Required Training Log

1. Enter Employee full Name
2. Enter Employee original Hire Date
3. Enter Position currently held
4. Enter Supervisor Initials
5. For each Training Type listed;
    a. Note the Training Type frequency (this is used to track recurring training)
    b. Place the date the training was provided
    c. Place the Instructor's full name in the space adjacent to the Training Type
    d. Enter notes as necessary

NOTE: Not all fields always require text entry. Contact your supervisor if there are questions. In cases where data is not required, DO NOT leave blank; enter N/A.

7.8 Form A-TECIF (Test Equipment Calibration and Inspection Form)

Alta Avionics LLC CRS# JN1R0210

Test Equipment Calibration and Inspection Form

Record#_____

Make_____ Model_____ S/N_____

Calibration Date_____ Next Calibration Date_____

This certificate shall not be reproduced except in full & with approval of Alta Avionics, LLC. We certify that this instrument meets or exceeds it published specification and has been calibrated using test equipment with accuracy traceable to the National Institute of Standards and Technology.

Reference Standards:

Make/Model_____ S/N_____ Record #_____

Make/Model_____ S/N_____ Record #_____

Make/Model_____ S/N_____ Record #_____

Make/Model_____ S/N_____ Record #_____

Make/Model_____ S/N_____ Record #_____

Make/Model_____ S/N_____ Record #_____

Calibrated By: _____

Inspected By: _____

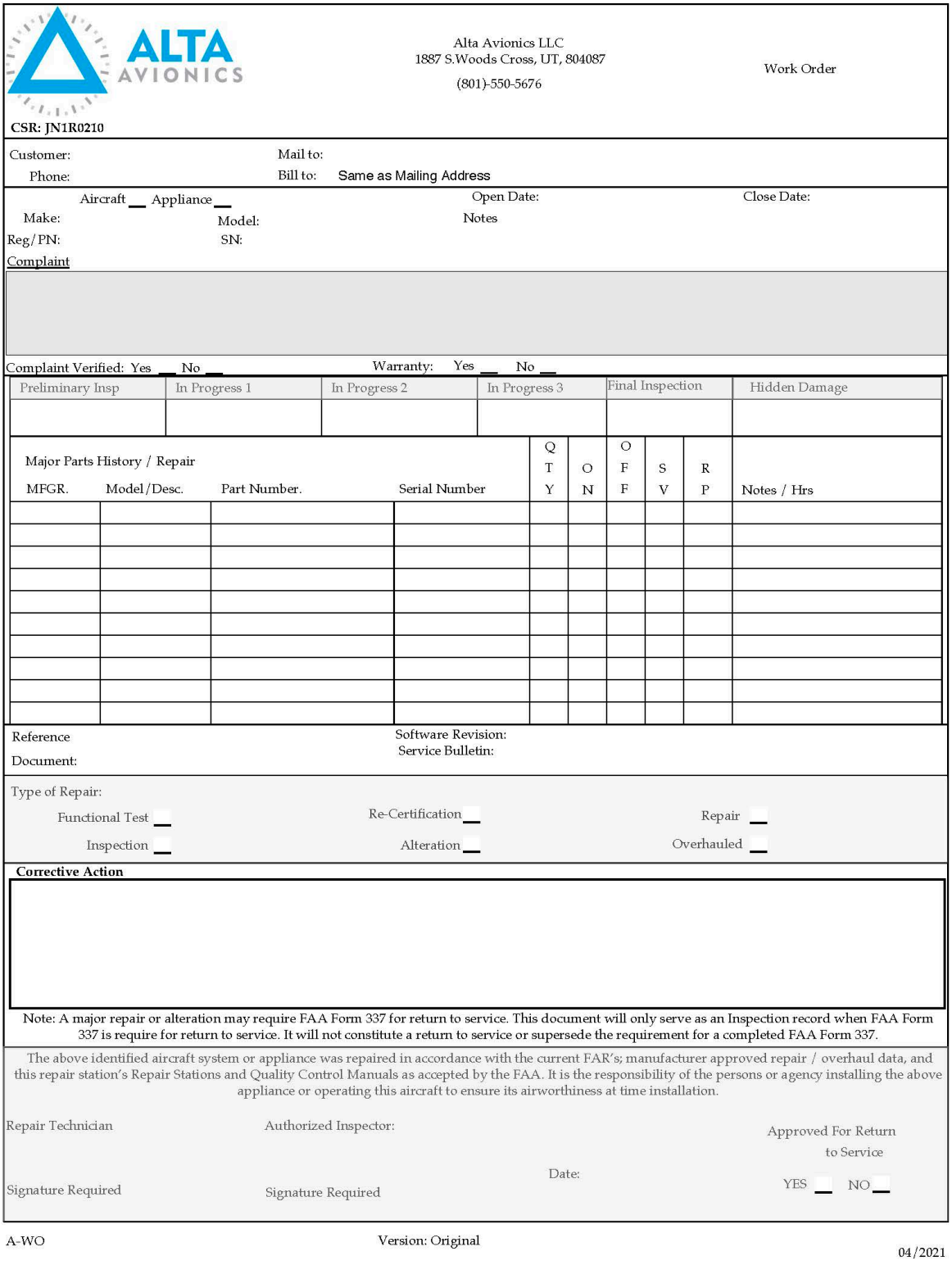
A-TECIF (05-21) Page 1 of 1

7.8.1 Instructions for Form Use: A-TECIF : Test Equipment Calibration and Inspection Form

1. Create/Enter a Record number for this activity; Work Order Number and Work Traveler Number
2. Enter the equipment Manufacturer's name
3. Enter the Manufacturer's Model Number
4. Enter the Manufacturer's Serial Number
5. Enter the Calibration Date (the date on which the calibration was completed)
6. Enter the Next Calibration Date (due date) based on the manufacturer's established interval, or other established interval acceptable to the FAA
7. Reference Standards; standard used, record the following;
8. Make/Model, Serial Number, and Record Number (of previous calibration)
9. Enter the name of the person performing the Calibration
10. Enter the name of the person performing inspection of the work performed

NOTE: Not all fields always require text entry. Contact your supervisor if there are questions. In cases where data is not required, DO NOT leave blank; enter N/A.

7.9 A-WO: Work Order



Alta Avionics LLC
1887 S.Woods Cross, UT, 804087
(801)-550-5676

Work Order

CSR: JN1R0210

Customer:
Phone:
Mail to:
Bill to: Same as Mailing Address

Aircraft __ Appliance __
Make:
Model:
Reg/PN:
SN:
Open Date:
Notes
Close Date:

Complaint

Complaint Verified: Yes __ No __
Warranty: Yes __ No __

Preliminary Insp	In Progress 1	In Progress 2	In Progress 3	Final Inspection	Hidden Damage

Major Parts History / Repair

MFGR.	Model/Desc.	Part Number.	Serial Number	QTY	ON	OFF	SV	RP	Notes / Hrs

Reference Document:
Software Revision:
Service Bulletin:

Type of Repair:
Functional Test __
Inspection __
Re-Certification __
Alteration __
Repair __
Overhauled __

Corrective Action

Note: A major repair or alteration may require FAA Form 337 for return to service. This document will only serve as an Inspection record when FAA Form 337 is require for return to service. It will not constitute a return to service or supersede the requirement for a completed FAA Form 337.

The above identified aircraft system or appliance was repaired in accordance with the current FAR's; manufacturer approved repair / overhaul data, and this repair station's Repair Stations and Quality Control Manuals as accepted by the FAA. It is the responsibility of the persons or agency installing the above appliance or operating this aircraft to ensure its airworthiness at time installation.

Repair Technician
Signature Required

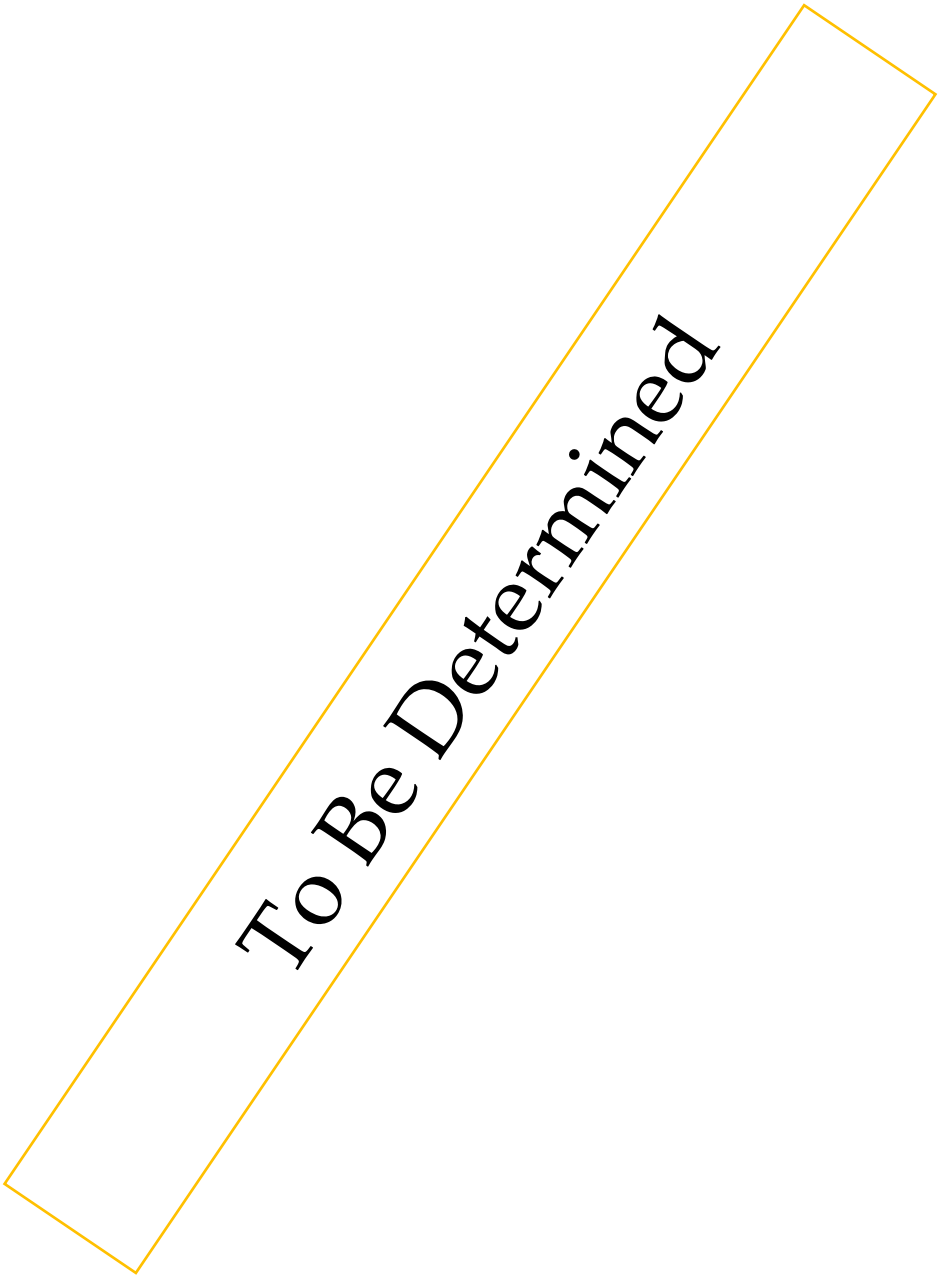
Authorized Inspector:
Signature Required

Date:

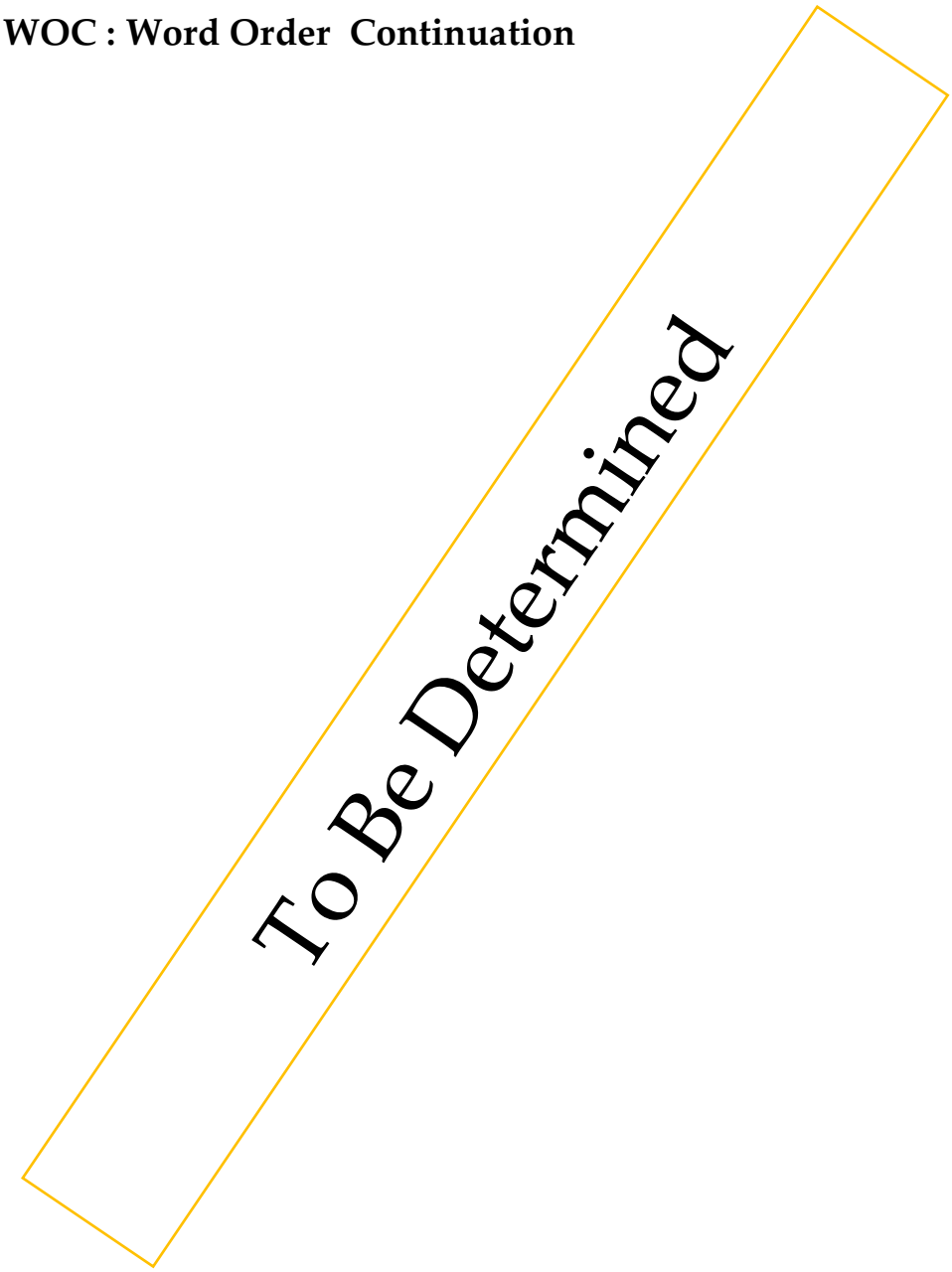
Approved For Return to Service
YES __ NO __

A-WO
Version: Original
04/2021

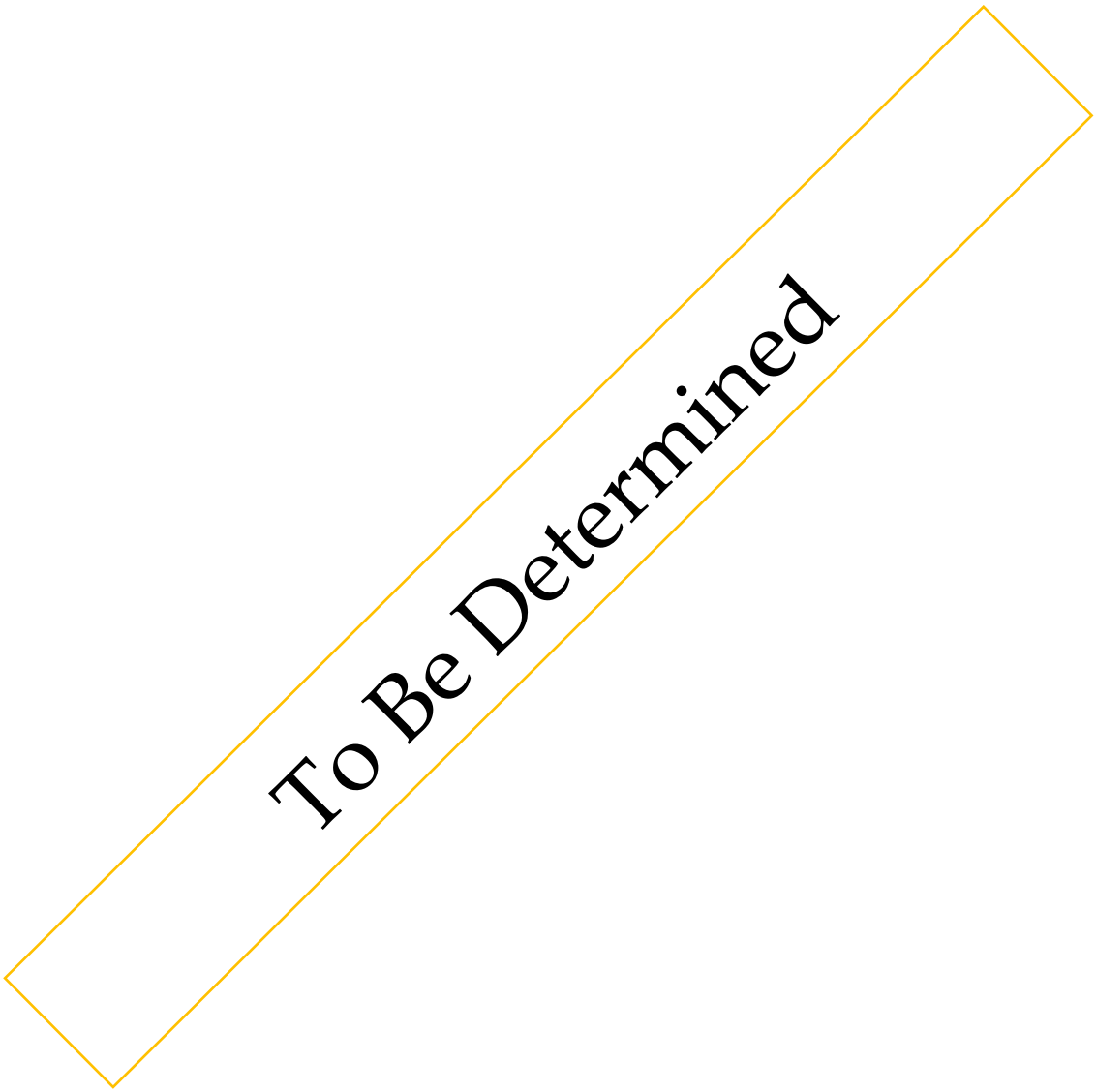
7.9.1 Instructions for Form Use : Work Order



7.10 A- WOC : Word Order Continuation



7.10.1 Instructions for Form Use : Work Order Continuation



7.11 AA-AFCA : Audit Findings/Corrective Action

Alta Avionics, LLC **CRS#JN1R0210**

Audit Findings/Corrective Action

VENDOR AUDIT

COMPANY _____
CONTACT _____
ADDRESS _____
_____
PHONE _____

DISCREPANCY (CIRCLE ONE)

1. _____ NEW / REPEAT
2. _____ NEW / REPEAT
3. _____ NEW / REPEAT
4. _____ NEW / REPEAT
5. _____

AUDITOR _____ DATE _____

INTERNAL AUDIT DEPT./AREA_____

DISCREPANCY (CIRCLE ONE)

1. _____ NEW / REPEAT
2. _____ NEW / REPEAT
3. _____ NEW / REPEAT
4. _____ NEW / REPEAT
5. _____ NEW / REPEAT

AUDITOR _____ DATE _____

CORRECTIVE ACTION

1. _____
2. _____
3. _____
4. _____
5. _____

ROOT CAUSE/CORRECTIVE ACTION (EXPLAIN) _____
_____
_____
_____

SIGNATURE _____DATE _____
AUDITOR _____ DATE _____

A-AFCA (05-21) Page 1 of 1

7.11.1 Instructions for Form Use : AA-AFCA : Audit Findings/Corrective Action

7.11.1.1 Vendor Audit;

1) Enter the name of the Company undergoing the Audit
2) Enter the name of a primary point of contact for the Company undergoing the Audit
3) Enter the physical address of the facility, of the Company undergoing the Audit
4) Enter the telephone number of the Company, or point of contact for the Company undergoing the audit
5) Discrepancy; enter a brief description of the discrepancy reported, or discovered during the audit; circle either 'New' or 'Repeat', as appropriate
6) Auditor; provide the name of the person performing the audit
7) Date; enter the date the audit was completed Internal Audit;
8) Enter the Department or Area undergoing the Audit
9) Discrepancy; enter a brief description of the discrepancy reported, or discovered during the audit; circle either 'New' or 'Repeat', as appropriate
10) Auditor; provide the name of the person performing the audit
11) Date; enter the date the audit was completed
12) Root Cause; enter a clear definition of the root cause and corrective action, in sufficient detail so as to aid in resolution of the discrepancy, and avoid repeats
13) Place the signature of the person taking corrective action on this line
14) Date; enter the date the person corrected the discrepancy
15) Place the name of the auditor on this line
16) Date; enter the date the corrective action was verified by the auditor

NOTE: Not all fields always require text entry. Contact your supervisor if there are questions. In cases where data is not required, DO NOT leave blank; enter N/A.

7.12 AA-IA : Internal Audit

Alta Avionics, LLC CRS# JN1R0210

INTERNAL AUDIT

Date of Audit: _____

Facility: _____ CRS#:_____

Department/Area: _____ Supervisor: _____

Auditor: _____ Audit Interval: _____

Audit Recommendations:

_____

_____

_____

_____

_____

_____

_____

_____

_____

1. FACILITIES AND EQUIPMENT:

	YES	NO	N/A
A. Is ventilation, lighting, temperature, and humidity? control adequate?	___	___	___
B. Is the floor plan laid out in an efficient manner?	___	___	___
C. Are good housekeeping practices being maintained?	___	___	___
D. When problems arise, are they taken care of promptly?	___	___	___

Alta Avionics, LLC CRS# JN1R0210

	YES	NO	N/A
2. STATION AUTHORITY AND LIMITATIONS VS. ACTUAL PRACTICES, INCLUDING CONTROLS OVER AND DEVIATION AUTHORITY:			
A. Do employees thoroughly understand the ratings/limitations of the Alta Avionics Repair Station?	___	___	___
B. Do employees adhere closely to the Repair Station ratings/limitations?	___	___	___
C. Do employees consult a supervisor or inspector when questions arise concerning Repair Station ratings/limitations?	___	___	___
3. PERSONNEL QUALIFICATIONS, TRAINING:			
A. Are personnel properly trained for the functions they are to perform?	___	___	___
• Supervisors	___	___	___
• Inspectors	___	___	___
• Receiving/Shipping	___	___	___
• Technicians	___	___	___
B. Are training records maintained on all applicable personnel?	___	___	___
C. Is there a program where employees can get recurrent training?	___	___	___
D. Are qualifications monitored and upgraded through training as often as the schedule of work allows?	___	___	___
4. MANUALS AND AIRWORTHINESS DATA:			
A. Are all required manuals at hand or easily available to all the employees?	___	___	___
B. Are all manuals up to date or properly labeled as For Reference Only?	___	___	___

Alta Avionics, LLC CRS# JN1R0210

	YES	NO	N/A
C. Are airworthiness records available to the employees?	___	___	___
D. Are drawings compiled from installation data for aircraft records? (Installation Dept)	___	___	___
E. Is there a system to prohibit hand entries or corrections to technical data?	___	___	___
5. SUPPLIER SELECTION APPROVAL AND SURVEILLANCE:			
A. Does parts/equipment orderer have access to a list of of approved suppliers from whom they can order parts/equipment/materials/services?	___	___	___
B. Is purchased material cycled through an inspection process?	___	___	___
C. Is control maintained over procurement sources?	___	___	___
D. Does Alta Avionics have a system to approve suppliers?	___	___	___
6. PARTS AND MATERIALS HANDLING:			
A. Are parts/materials stored properly?	___	___	___
B. Is material protected from damage, deterioration, loss or substitution?	___	___	___
C. Has a secured area been set aside for storage of non-conforming or questionable material, including separation of received materials and marketable stock (radios, instruments, equipment, parts)?	___	___	___
D. Are aircraft parts stored separately from non aircraft parts?	___	___	___
E. Does the department adhere to the traceability and record keeping requirements for the distribution of these parts?	___	___	___

	YES	NO	N/A
F. Is the department able to identify the individual parts and equipment suppliers?	___	___	___
G. Does the department follow acceptable packaging preservation procedures?	___	___	___
H. Does the department use adequate packaging or customers packaging when appropriate?	___	___	___
I. Are parts/materials properly identified?	___	___	___
J. Are parts which are susceptible to electrostatic discharge damage properly packaged, handled and stored?	___	___	___
7. INSPECTION AND QUALITY CONTROL:			
A. Is the department following quality control and inspection procedures written into the Repair Station and Quality Control Manual?	___	___	___
B. Are the inspectors properly trained?	___	___	___
C. Is the inspection roster available to all employees of the department?	___	___	___
D. Are all inspections for installation and repairs performed at the proper intervals?	___	___	___
E. If the department inspector is absent, do the employees' of the department know where to find the alternate inspector?	___	___	___
F. Are inspections properly documented?	___	___	___
G. Are inspections conducted by authorized personnel only?	___	___	___
H. Do inspectors have access to current data necessary to support an acceptable inspection process?	___	___	___

		YES	NO	N/A
I.	Do inspectors have access to the proper tools, gauges, instruments, and test equipment to properly inspect the characteristics of the product?	___	___	___
8.	TOOL ADEQUACY AND CALIBRATION:			
A.	Is all test equipment within the department marked with a CAL tag giving the CAL date, CAL due date, and CAL BY info?	___	___	___
B.	Do the employees of the department, including department head, check the CAL dates on a regular basis?	___	___	___
C.	Do the department supervisors know where the test equipment quarantine area is for test equipment found defective or out of CAL?	___	___	___
D.	Is the test equipment properly cared for while in use or in storage?	___	___	___
E.	Does the department have available to it all of the required test equipment for the range of jobs it performs?	___	___	___
F.	Does the department have available to it all of the required tooling, crimpers, removal and insertion tools?	___	___	___
9.	MAINTENANCE RELEASE PROCESS:			
A.	Are all of the forms properly filled out for receiving an aircraft for an installation?	___	___	___
B.	When the equipment or aircraft repair is completed, are the return to service forms properly filled out, and complete with all required inspections?	___	___	___
C.	When outside work is required, are the proper maintenance releases received from them and documented?	___	___	___
10.	DEFECT REPORTING:			
A.	Are defects being reported when they occur in paperwork equipment, parts, or any process thereof?	___	___	___

Alta Avionics, LLC CRS# JN1R0210

	YES	NO	N/A
11. RECORDS AND RECORD KEEPING PROCEDURES:			
A. Are records for the department for parts, repairs, and ongoing inspections being complied with as described in Alta Avionics, Inc. Repair Station Manual?	___	___	___
B. Are the above mentioned records being kept in storage for the required time?	___	___	___
C. Does each part have a traceability certificate that can be linked to an approved vendor?	___	___	___
D. Does Alta Avionics purchase records/sales order chain of custody lead to production approval holder (PMA, TSO, PC, TC, STC Holder) or manufacturer of standard parts?	___	___	___
E. Is serial number traceability maintained when applicable?	___	___	___
12. SHELF LIFE ITEMS:			
A. Does the department follow Alta Avionics documented shelf life program?	___	___	___
B. Are expired shelf life items properly disposed of?	___	___	___

7.12.1 Instructions for Form Use : AA-IA : Internal Audit

1. Enter the date of the Audit (scheduled or otherwise)
2. Enter the title of the Facility undergoing the Audit (e.g. Henderson, Apple Valley, etc.)
3. Enter the repair station certificate number
4. Enter the name of the department or area undergoing the Audit (e.g., Stock Room, Repaired Unit Storage Area, etc.)
5. Enter the name of the Supervisor responsible for the department or area undergoing the audit
6. Enter the name of the Auditor
7. Enter the typical interval or scheduled Audit Interval
8. Enter a brief description of Recommendations under which the Audit will be conducted
9. Facilities and Equipment; these audit element questions are self-explanatory, review and answer all audit element questions
10. Authority and Limitations and Actual Practices; these audit element questions are self-explanatory, review and answer all audit element questions
11. Personnel Qualifications and Training; these audit element questions are self-explanatory, review and answer all audit element questions
12. Manuals and Airworthiness Data; these audit element questions are self-explanatory, review and answer all audit element questions
13. Supplier Selection Approval and Surveillance; these audit element questions are self-explanatory, review and answer all audit element questions
14. Parts and Materials Handling; these audit element questions are self-explanatory, review and answer all audit element questions
15. Inspection and Quality Control; these audit element questions are self-explanatory, review and answer all audit element questions
16. Tool Adequacy and Calibration; these audit element questions are self-explanatory, review and answer all audit element questions
17. Maintenance Release Process; these audit element questions are self-explanatory, review and answer all audit element questions
18. Defect Reporting; these audit element questions are self-explanatory, review and answer all audit element questions
19. Records and Recordkeeping; these audit element questions are self-explanatory, review and answer all audit element questions
20. Shelf Life; these audit element questions are self-explanatory, review and answer all audit element questions

NOTE: Not all fields always require text entry. Contact your supervisor if there are questions. In cases where data is not required, DO NOT leave blank; enter N/A.

7.13 AL-ACMR : Log Entry : Air Carrier Maintenance Release

ALTA AVIONICS	1887 S. 1800 W. Woods Cross, UT 84087 (801) 550-5676	CRS# JN1R0210	FORM AL-ACMR(05-21)

Tail#	Mfg:	Model:	Serial:	TTAF:	Hobbs:

This is a Permanent Logbook Entry:

---------- END ----------

Air Carrier Maintenance Release – The above identified ☐ Appliance ☐ Aircraft was repaired and inspected in accordance with current regulations of the FAA and in concurrence with air carrier operations specification, and is approved for return to service.
Pertinent details of the repair are on file at this station under work order no.

Signed: _____ Date: _____

7.14 AL-ATI : Log Entry – Altimeter Test and Inspection

TAIL	MAKE:	MODEL:	S/N:	ACTT:

THIS IS A PERMANENT LOGBOOK ENTRY – PERFORMED TEST AND INSPECTIONS IAW 14 CFR PART 43, APPENDIX E TO COMPLY WITH 91.411 ☐; APPENDIX F TO COMPLY WITH FAR 91.413 ☐; PART 91.217 ☐

AIRPORT ID		ALTITUDE		STATIC SYS TEST ALT	#1		#2		#3	

	MFG	MODEL	PART #	SERIAL #	TEST ALT
ALTIMETER #1					
ADC/ENCODER #1					
ALTIMETER #2					
ADC/ENCODER #2					
ALTIMETER #STBY					
TRANSPONDER #1					
TRANSPONDER #2					

PERTINENT DETAILS ARE ON FILE AT THIS REPAIR STATION UNDER W/O# ____

AUTH SIGNATURE: _____ DATE: ____ RECERT DUE DATE: ____

Maintenance release, this aircraft was inspected in accordance with current regulations of the FAA and is approved for return to service.
Alta Avionics, LLC, 1887 S 1800 W, WOODS CROSS, UT CRS: JN1R0210 **FORM AL-ATI(05-21)**

7.14.1 Instructions for Form Use : AL-ATI : Altimeter Tests and Inspections

1. Enter an X in the box, if appropriate, denoting compliance with Appendix E & F of 14 CFR 43, as required by 14 CFR 91 §91.411
2. Enter an X in the box, if appropriate, denoting compliance with Appendix F of 14 CFR 43, as required by 14 CFR 91 §91.413
3. Static System Leak Check;
    a. Enter the altitude, in feet, a given system is tested to
4. Location Performed; enter the airport identifier where the work was performed as the location
5. Equipment Identification;
    a. For all installed equipment comprising the pitot/static/transponder system;
    b. Enter the Manufacturer's name
    c. Enter the Manufacturer's Model Number
    d. Enter the Manufacturer's Part Number
    e. Enter the Manufacturer's Serial Number
    f. Enter the value (in feet above sea level) the individual equipage was tested
6. Enter the Work Order number under which the tests and inspections are being performed
7. Enter the aircraft Manufacturer's Model Number
8. Enter the aircraft Manufacturer's Serial Number
9. Enter the aircraft registration number
10. Enter the aircraft Hobbs (hour) Meter time
11. Enter the aircraft tachometer (hours) time
12. Enter comments regarding the performance or functionality, as needed
13. Apply the signature of the person authorized to perform the tests and inspections, and return for service
14. Enter the date on which the tests and inspections were completed

NOTE: Not all fields always require text entry. Contact your supervisor if there are questions. In cases where data is not required, DO NOT leave blank; enter N/A.

7.15 AL-GAMR : Log Entry : General Aviation Maintenance Release

ALTA AVIONICS	1887 S. 1800 W. Woods Cross, UT 84087	CRS# TBD	FORM AA-LE-GAMR(04-20)

Tail#	Mfg:	Model:	Serial:	TTAF:	Hobbs:

This is a Permanent Logbook Entry:

General Aviation Maintenance Release – The above identified ☐ Appliance ☐ Aircraft was repaired and inspected in accordance with current regulations of the FAA and is approved for return to service. Pertinent details of the repair are on file at this station under work order no.

Signed: _____ Date: _____

7.16 AT-AT (Article Tag)

7.16.1 Instructions for Sticker/Tag/Label Use: AT-AT (Article Tag)

1) Check the appropriate box(s) to best describe what was done to the article.
   a) OPS CHK: Operations and Functions were checked.
   b) OH: Overhauled
   c) REPAIRED: Repaired
   d) TESTED: Tested to function within approved or accepted data.
2) THRU: If a warranty on the work done on this article applies, insert the date through which the warranty will be valid.
3) REF#: Work Order number from Form A-WO.

7.17 AT-CS (Calibration Sticker)

7.17.1 Instructions for Sticker/Tag/Label Use: AT-C (Calibration Sticker)

1) ID#: Identifying number or Serial Number that identifies the article that has been calibrated.
2) Date: Date (yy/mm/yyyy) that the calibration was completed.
3) Due: Due date of the next required calibration.
4) By: Enter the name of the person(s) who completed the calibration.

7.18 AT-LST (Locator/Status Tag)

LOCATOR/STATUS TAG

W/O#: _____

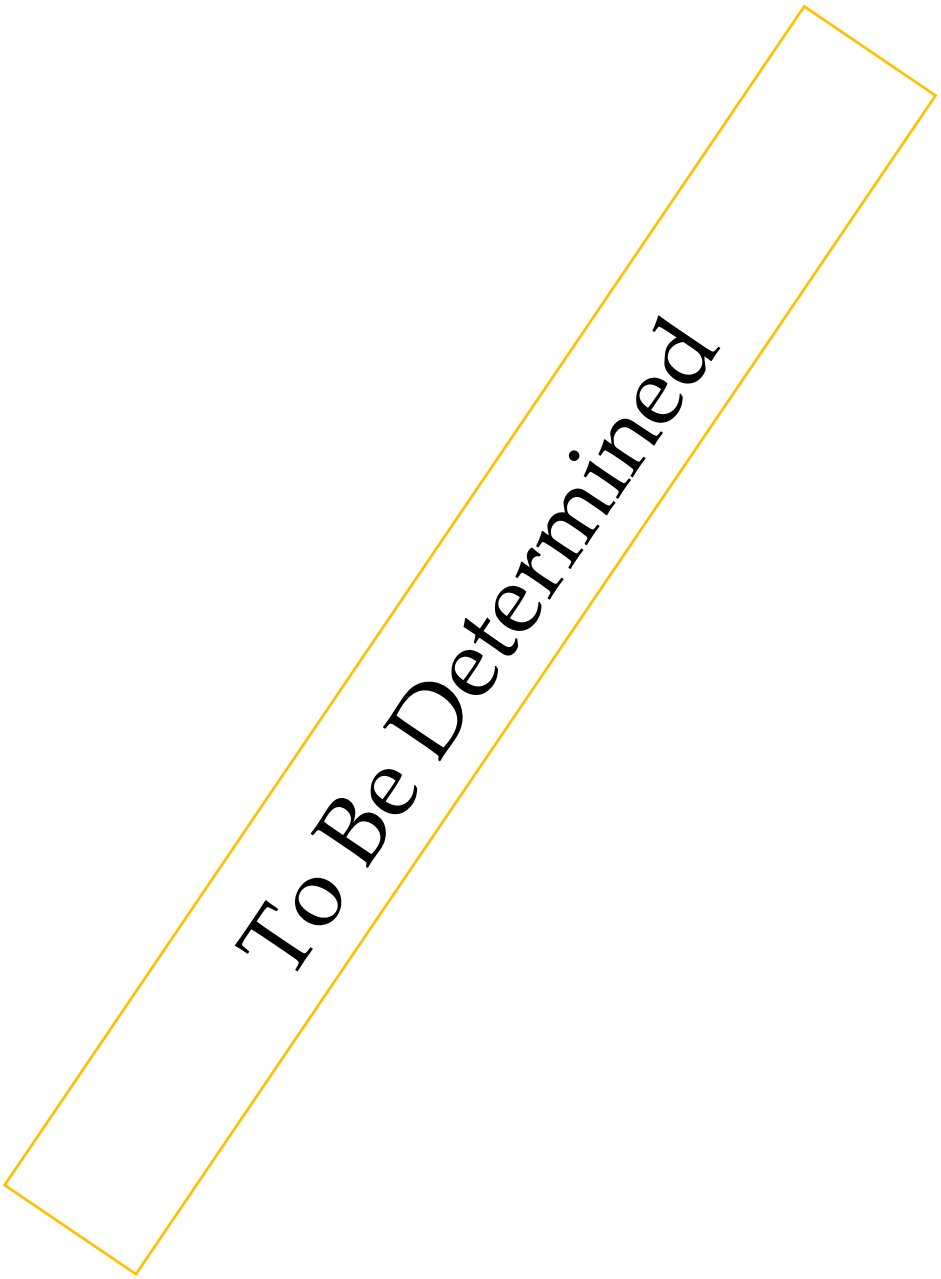
CUSTOMER:_____

PARTS: EXCHANGE □

REPAIR □

Notes:_____

7.18.1 Instructions for Sticker/Tag/Label Use: AT-LS (Locator/Status)



7.19 AT-Q (Quarantine Tag)

QUARANTINE

Date/By:_____

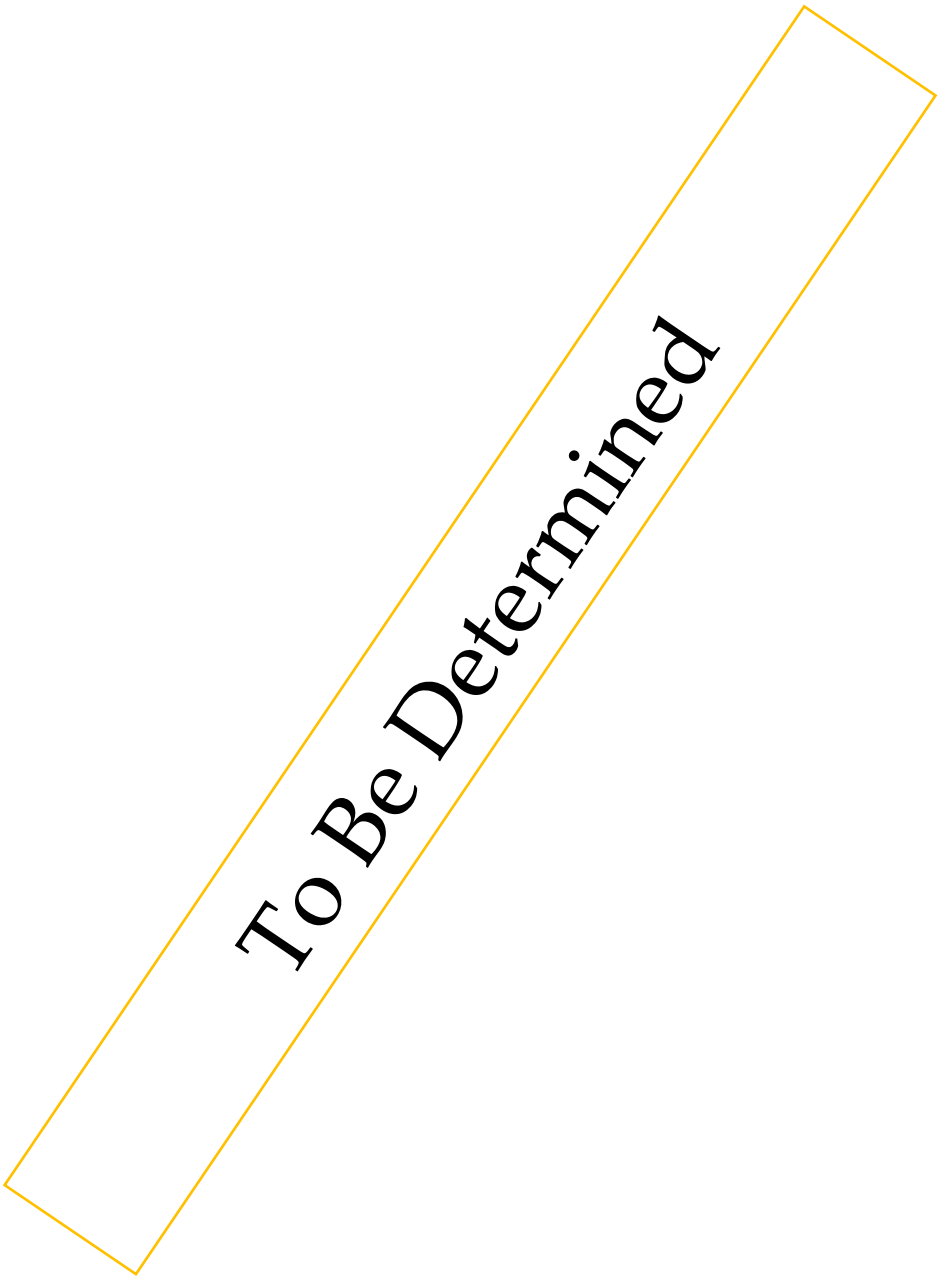
Reason:_____

P/N:_____

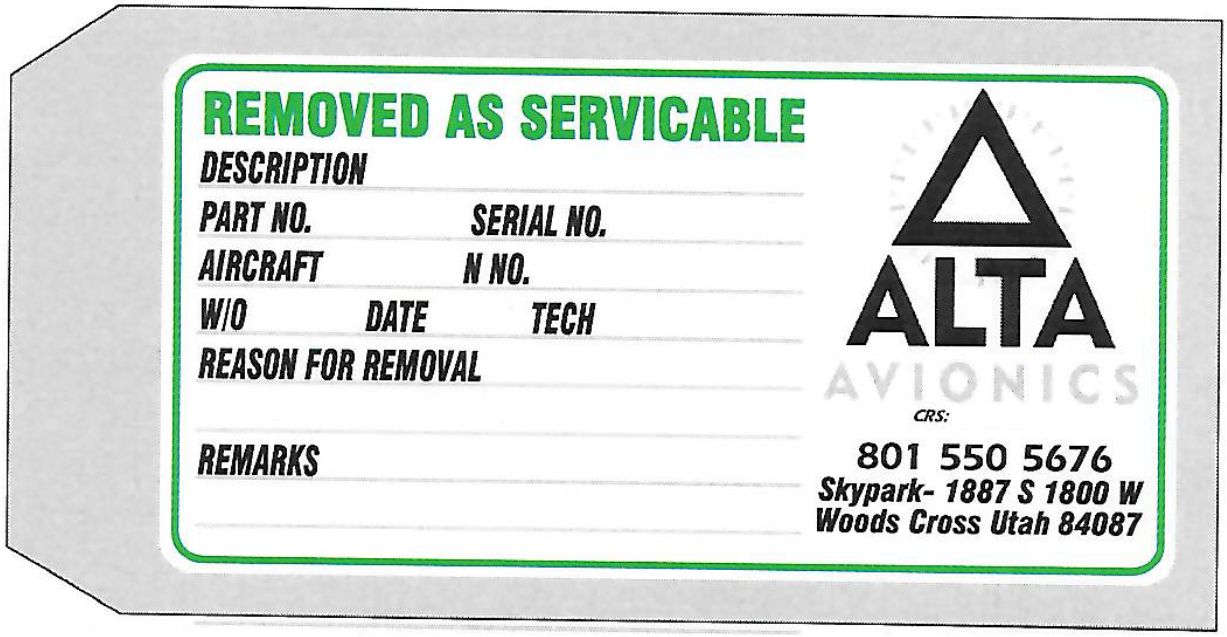
S/N:_____

Alta Avionics LLC 801-550-5676

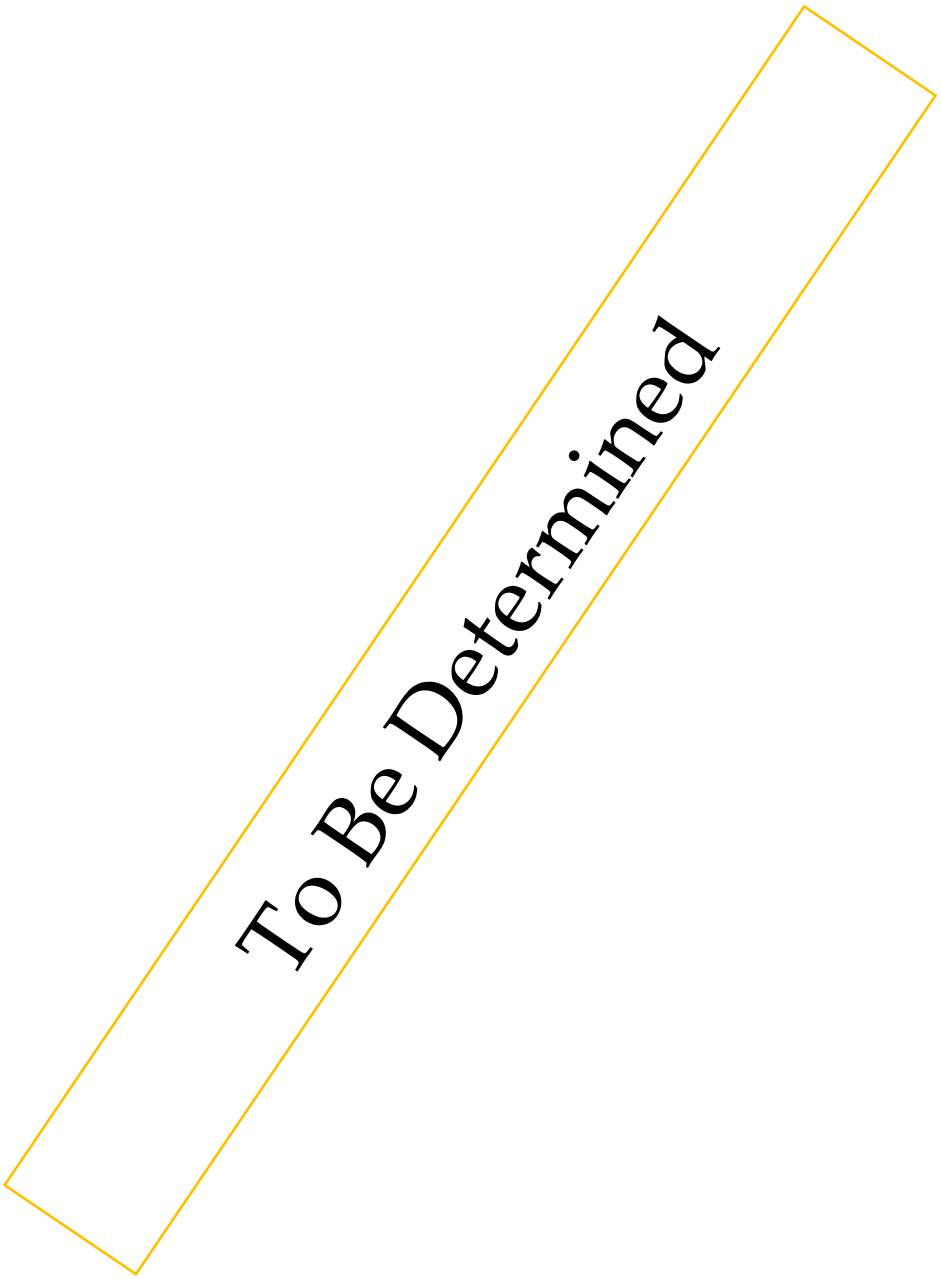
7.19.1 Instructions for Sticker/Tag/Label Use: AT-Q (Quarantine)



7.20 AT-RAS (Removed as Serviceable)



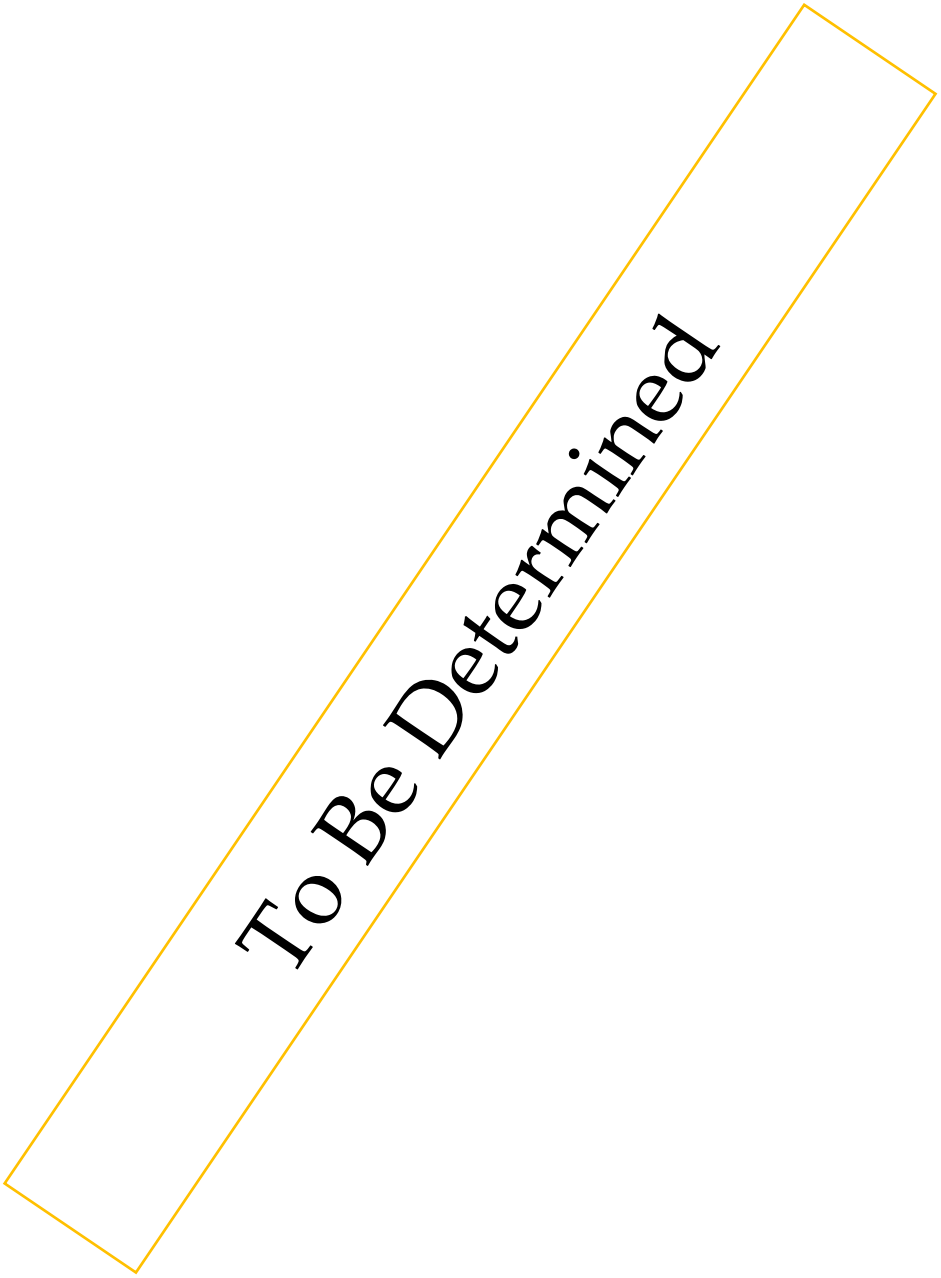
7.20.1 Instructions for Sticker/Tag/Label Use: AT-RAS (Removed As Servicable)



7.21 AT-RFS (Repairable For Storage)

Repairable – For Storage
MFG _____ Model_____
S/N _____ P/N _____
Defect _____
Alta Avionics LLC 801-550-5676
CRS: JN1R0210

7.21.1 Instructions for Sticker/Tag/Label Use: AT-RFS (Repairable For Storage)



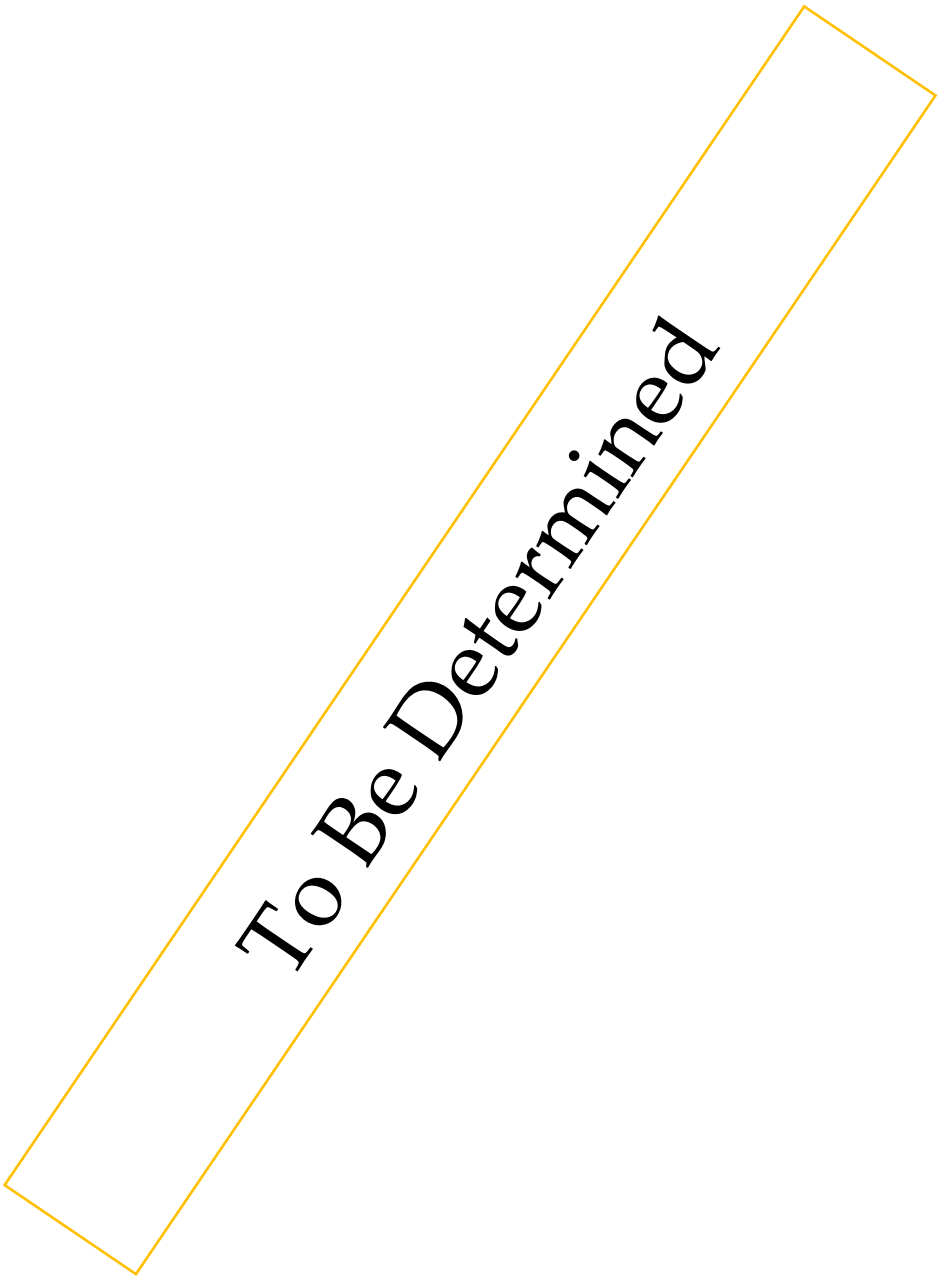
7.22 AT-Rejected Item

Reject Item

Alta Avionics LLC. 801-550-5676

CRS: JN1R0210

7.22.1 Instructions for Sticker/Tag/Label Use: AT-RI (Rejected Item)



7.23 AT-SLI (Shelf Life Item)

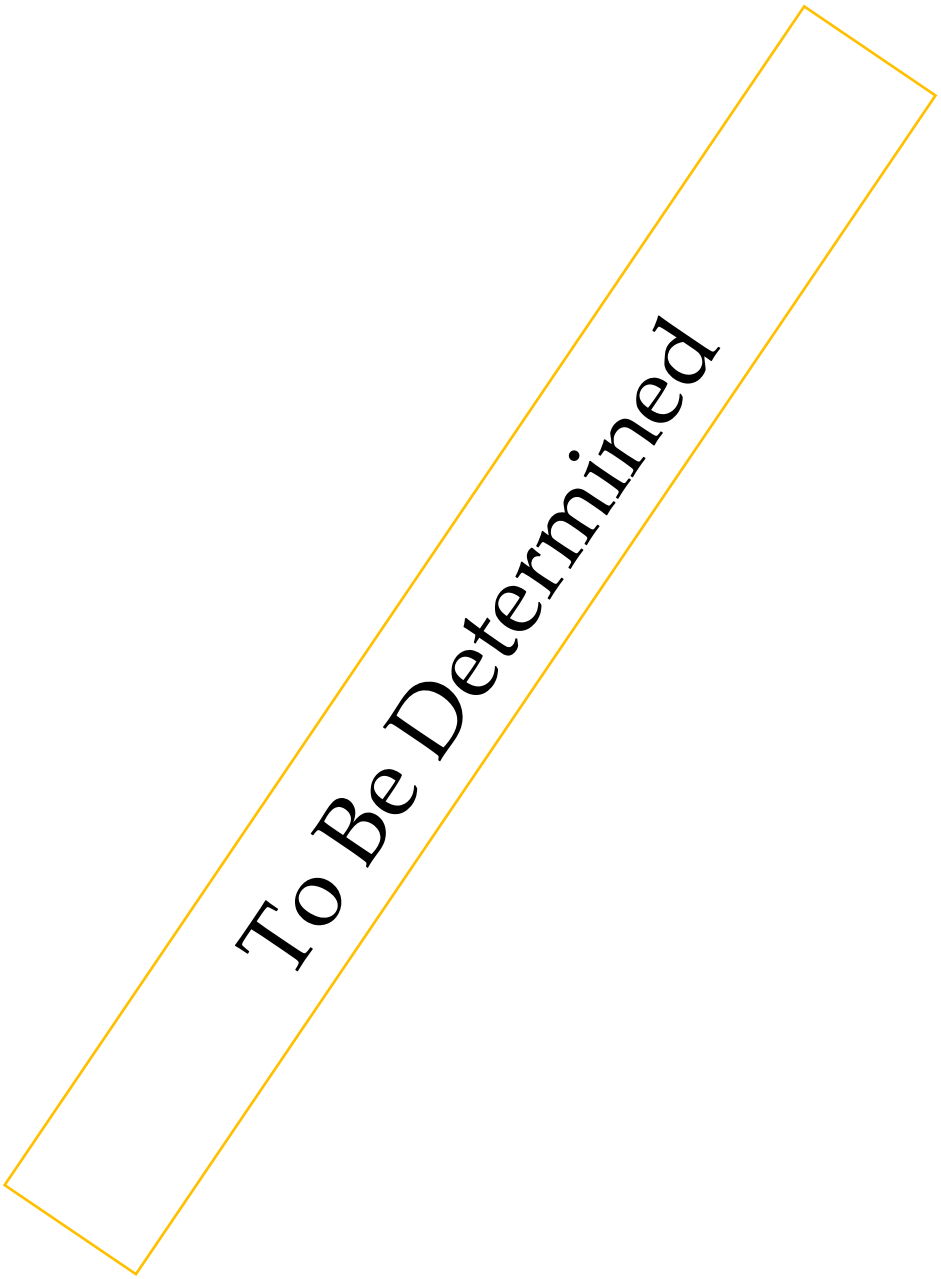
Shelf Life Item

Expiration Date_____

Alta Avionics LLC

CRS: JN1R0210

7.23.1 Instructions for Sticker/Tag/Label Use: AT-SLI (Shelf Life Item)



7.24 AT-T43 (Tested As Per FAR 43))

This unit tested per FAR Part 43, Appendix E

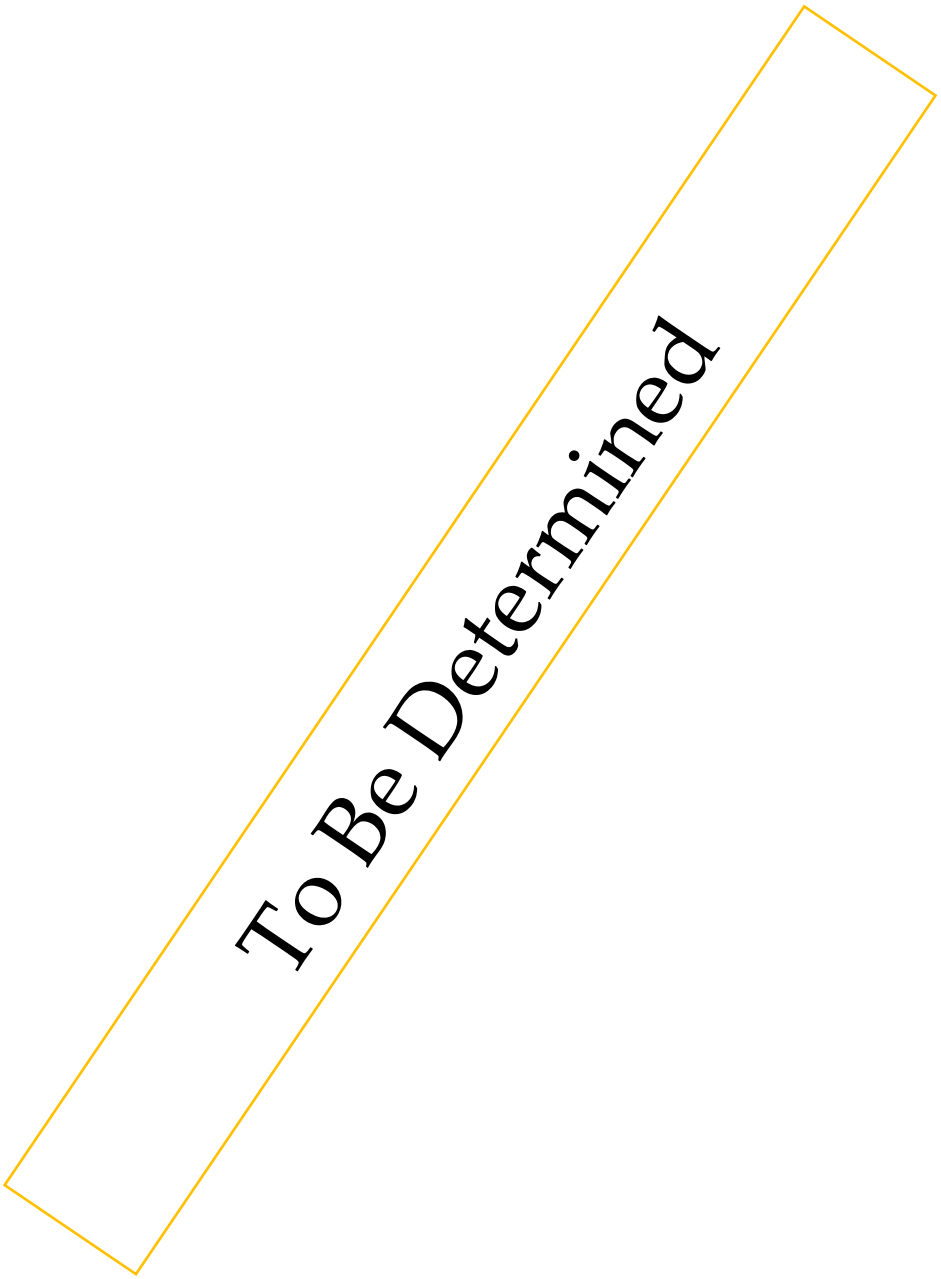
To _____FT

WO: _____ Date:_____

Alta Avionics LLC 801-550-5676

CRS: JN1R0210

7.24.1 Instructions for Sticker/Tag/Label Use: AT-T43 (Tested As Per FAR 43)



7.25 FAA Form 337: Major Repair and Alteration (Airframe, Powerplant, Propeller, or Appliance)

US Department of Transportation
Federal Aviation Administration

MAJOR REPAIR AND ALTERATION
(Airframe, Powerplant, Propeller, or Appliance)

OMB No. 2120-0020
Exp: 01/31/2023

Electronic Tracking Number

For FAA Use Only

INSTRUCTIONS: Print or type all entries. See Title 14 CFR §43.9, Part 43 Appendix B, and AC 43.9-1 (or subsequent revision thereof) for instructions and disposition of this form. This report is required by law (49 U.S.C. §44701). Failure to report can result in a civil penalty for each such violation. (49 U.S.C. §46301(a))

1. Aircraft	Nationality and Registration Mark	Serial No.	
	Make	Model	Series
2. Owner	Name *(As shown on registration certificate)*	Address *(As shown on registration certificate)* Address City State Zip Country	

3. For FAA Use Only

4. Type		**5. Unit Identification**			
Repair	Alteration	Unit	Make	Model	Serial No.
☐	☐	AIRFRAME		*(As described in Item 1 above)*	
☐	☐	POWERPLANT			
☐	☐	PROPELLER			
☐	☐	APPLIANCE	Type Manufacturer		

6. Conformity Statement

A. Agency's Name and Address	B. Kind of Agency	
Name Address City State Zip Country	☐ U. S. Certificated Mechanic	☐ Manufacturer
	☐ Foreign Certificated Mechanic	C. Certificate No.
	☐ Certificated Repair Station	
	☐ Certificated Maintenance Organization	

D. I certify that the repair and/or alteration made to the unit(s) identified in item 5 above and described on the reverse or attachments hereto have been made in accordance with the requirements of Part 43 of the U.S. Federal Aviation Regulations and that the information furnished herein is true and correct to the best of my knowledge.

Extended range fuel per 14 CFR Part 43 App. B ☐	Signature/Date of Authorized Individual

7. Approval for Return to Service

Pursuant to the authority given persons specified below, the unit identified in item 5 was inspected in the manner prescribed by the Administrator of the Federal Aviation Administration and is ☐ Approved ☐ Rejected

BY	☐	FAA Flt. Standards Inspector	☐ Manufacturer	☐	Maintenance Organization	☐	Persons Approved by Canadian Department of Transport
	☐	FAA Designee	☐ Repair Station	☐	Inspection Authorization		Other *(Specify)*

Certificate or Designation No.	Signature/Date of Authorized Individual

FAA Form 337 (10/06)

NOTICE

Weight and balance or operating limitation changes shall be entered in the appropriate aircraft record. An alteration must be compatible with all previous alterations to assure continued conformity with the applicable airworthiness requirements.

8. Description of Work Accomplished
(If more space is required, attach additional sheets. Identify with aircraft nationality and registration mark and date work completed.)

Nationality and Registration Mark | Date

Additional Sheets Are Attached

FAA Form 337 (10/06)

7.25.1 Instructions for Form Use: FAA Form 337 (Major Repair and Alteration)

Authorized Alta Avionics, LLC personnel filling out FAA Form 337 **must** read and understand FAA Advisory Circular (AC) 43.9 (as revised), (Instructions for Completion of FAA Form 337). Authorized Alta Avionics, LLC personnel filling out FAA Form 337 **must** also read and understand CFR 14 Part 43, Appendix B (Recording of Major Repairs and Major Alterations).

1) As requested by the owner/operator and allowed by 14 CFR Part 43 Appendix B para (b), Major Repairs can be recorded in the work order and a maintenance log entry instead of FAA Form 337.

2) When required, records of major repairs and alterations will be made on FAA Form 337. Completion of FAA Form 337 will be accomplished using FAA Advisory Circular (AC) 43.9 (as revised), (Instructions for Completion of FAA Form 337) and CFR 14 Part 43, Appendix B (Recording of Major Repairs and Major Alterations).

   NOTE: After completion, the original FAA Form 337 shall be supplied to the customer. A copy will be made part of the work order package for the repair station records, and (within 48 hours) a copy will be forwarded to:

   FAA Aircraft Registration Branch
   P.O. Box 25504
   Oklahoma City, OK 73125-0504

7.26 FAA Form 8130-3: (Authorized Release Certificate)

1. Approving Civil Aviation Authority/Country: FAA/United States	2. **AUTHORIZED RELEASE CERTIFICATE** FAA Form 8130–3, AIRWORTHINESS APPROVAL TAG	3. Form Tracking Number:
4. Organization Name and Address:		5. Work Order/Contract/Invoice Number:

6. Item:	7. Description:	8. Part Number:	9. Quantity:	10. Serial Number:	11. Status/Work:

12. Remarks:

13a. Certifies the items identified above were manufactured in conformity to: ☐ Approved design data and are in a condition for safe operation. ☐ Non-approved design data specified in Block 12.		14a. ☐ 14 CFR 43.9 Return to Service ☐ Other regulation specified in Block 12 Certifies that unless otherwise specified in Block 12, the work identified in Block 11 and described in Block 12 was accomplished in accordance with Title 14, Code of Federal Regulations, part 43 and in respect to that work, the items are approved for return to service.	
13b. Authorized Signature:	13c. Approval/Authorization No.:	14b. Authorized Signature:	14c. Approval/Certificate No.:
13d. Name (Typed or Printed):	13e. Date (dd/mmm/yyyy):	14d. Name (Typed or Printed):	14e. Date (dd/mmm/yyyy):

User/Installer Responsibilities

It is important to understand that the existence of this document alone does not automatically constitute authority to install the aircraft engine/propeller/article.

Where the user/installer performs work in accordance with the national regulations of an airworthiness authority different than the airworthiness authority of the country specified in Block 1, it is essential that the user/installer ensures that his/her airworthiness authority accepts aircraft engine(s)/propeller(s)/article(s) from the airworthiness authority of the country specified in Block 1.

Statements in Blocks 13a and 14a do not constitute installation certification. In all cases, aircraft maintenance records must contain an installation certification issued in accordance with the national regulations by the user/installer before the aircraft may be flown.

FAA Form 8130–3 (02–14) NSN: 0052-00-012-9005

7.26.1 Instructions for Form Use: FAA 8130-3 (Authorized Release Certificate)

Authorized Alta Avionics, LLC personnel filling out Form FAA 8130-3 **must** read and understand FAA order 8130.21 as revised, (Procedures for Completion of the Authorized Release Certificate, FAA Form 8130-3, Airworthiness Approval Tag). Authorized Alta Avionics, LLC personnel filling out form FAA 8130-3 should also read and understand FAA Order 8130.21H (Authorized Release Certificate, FAA Form 8130-3, Airworthiness Approval Tag Frequently Asked Questions (FAQ))

The following instructions explain in summary the appropriate procedures in filling out this form. These procedures are derived from FAA Order 8130-21 (as revised). In all cases where there is a conflict with these instructions and with FAA Order 8130-21 (as revised), FAA Order 8130-21 will take precedence and the conflict reported to a supervisor at Alta Avionics, LLC.

1) **Approving National Aviation Authority/Country**:
   FAA/United States (Preprinted)
2) Authorized Release Certificate, FAA form 8130-3, Airworthiness Approval Tag.(Preprinted)
3) **Form Tracking Number**:
   The number will be unique to each serialized component and be comprised of the Work Order number (Form A-WO), a dash (-) followed by the squawk or step number from that Work Order. One squawk in the work order per serialized component unless the P/N in Blk. 8 comprises many serialized parts to make a kit or set. In these cases, create an attachment to the 8130-3 listing all serialized components of the same P/N.
4) **Organization Name and Address**:
   Alta Avionics, LLC. 1887 S. 1800 W. Woods Cross, Utah 84087, FAA Repair Station #: JN1R0210.
5) **Work Order/Contract/Invoice Number**:
   Alta Avionics, LLC Work Order number from Form A-WO, corresponding to the work scope.
6) **Item**: Alta Avionics, LLC is only authorized to use this form for approval for return to service and only allowed to issue 1(one) x 8130-3 for "1" P/N at a time.
7) **Description**:
   Enter the name or description of the product, part or appliance as referenced in a part catalog or overhaul manual.
8) **Part Number**:
   Enter part number of the product or article. There should be ONE(1) part number per one(1) Form 8130-3. If the article being worked is a subassembly that does not have a part number of its own, enter the next higher assembly number followed by the word "subassembly". If appropriate, add further descriptive information in Block. 12 (Remarks).
9) **Quantity**:
   Enter "1" unless there are multiple un-serialized components of the same P/N in Block. 8. Or multiple S/N's of the same P/N that make up a kit/set.

10) **Serial Number**:
If the product or article is required by part 45 to be identified with a serial number, enter it here. Additionally, any other serial number not required by regulation also may be entered. If no serial number is entered in this block, enter "N/A." Multiple serial numbers can be entered here associated with one part number.

11) **Status/Work**:
The following describes what to enter in a specific situation. Only one term may be entered in Block 11, which should reflect the majority of the work performed by Alta Avionics, LLC.

a) "Overhauled":
A process that ensures the article is in complete conformity with the applicable service tolerances specified in the type certificate, manufacturer's instructions for continued airworthiness or in the data approved or accepted by the authority. The product or article will be at least disassembled, cleaned, inspected, repaired as necessary, reassembled, and tested in accordance with the approved or accepted data.

b) "Repaired":
Repair of defect(s) using an applicable standard.

c) "Inspected" and/or "Tested":
Examination or measurement in accordance with an applicable standard (for example, visual inspection, functional testing, or bench testing).

d) "Modified":
Alteration of a product or article to conform to an applicable standard.

NOTE: The applicable standard used in any of the above must be described in Block 12 (Remarks).

12) **Remarks**:
Describe the work identified in Block 11 and associated results necessary for the user or installer to determine the airworthiness of the product or article in relation to the work being certified. Example: "Overhauled in accordance with 'Mooney M20 Series Service & Maintenance Manual', Section: H.1, Manual: MAN104, Revision: July 1980", and AD reference where applicable. If necessary, a separate sheet may be used and referenced from the main FAA Form 8130-3. Each statement must clearly identify which product or article in Block 6 it relates to.
NOTE: The applicable standard must be described in this block.

13) **'a' through 'e'**:
Blocks 13a through 13e: Shade, darken, or otherwise mark to preclude inadvertent or unauthorized use, (For original manufacturer of new components only).

14) Approval for Return to Service.

a) Both boxes are to be checked for a valid dual release.

b) **Authorized Signature**:
This space will be completed with the signature of the Alta Avionics, LLC authorized

person. Only persons specifically authorized and listed on the Alta Avionics roster are permitted to sign this block. The approval signature must be applied at the time and place of issuance.

c) **Approval/Certificate No.**:
Enter the Alta Avionics, LLC Certified Repair Station number: JN1R0210.

d) **Name (Typed or Printed):**
Type or print name of the authorized representative whose signature appears in Block 14b.

e) **Date (dd/mmm/yyyy)**:
The date to be entered in Block 14e for approval for return to service will be the date on which the original work was completed. The date must be in the following format: two-digit day, first three letters of the month, and four-digit year, for example, 10/JUN/2021.