NORTHWING UUM INC 103 gala ave- Chelan, Wa. 98816

Send To: FAX# 509-682-0758 Or Ultrikes@northwing.com

## CONTINUED AIRWORTHINESS SAFETY REPORTING FORM

FOR: Safety Directives= SD Service Advisories= SA

This form is to obtaining information required for improvement of our Aircraft and our continued airworthiness requirements. Please fill out the form to the best of your abilities and send, email or fax it to the following:

Name:	
Address:	City&St
Country	
Email:	Phone:
Model:	
N Number:	Serial#
Issue Date: To	tal Time in Service:
Part Name:	Part #
<u> </u>	axi Maintenance Accident
Other	D 111 01
Aircraft was used for: Flight Training	ing Personal Use Other
Issue Description: Remarks, Addition	onal information:
issue Description. Remarks, Addition	onar miormation.
For Internal Use	
Received by:	Date&time:
Reviewed by:	/
Cause of Issue: Construction We	ear Service Not Determined
Issue Bulletin: YES NO	Type: Safety Directives
Service Advisories SD or S	SA REF #
	ward To: AC Owners Web site
Other Action Taken:	
No Formal Action Taken:	
Approved by:	Date: