

# PARACHUTE EQUIPMENT RECORD OF INSPECTION



<b>Section 1: Customer Details</b>																				
<b>Contact Name:</b>		<b>Contact No.:</b>																		
<b>Work required:</b>																				
<b>Section 2: Inspection &amp; Maintenance</b>																				
<b>Harness/Container Details</b>																				
<b>H/C Make/Model:</b>																				
<b>H/C Serial No.:</b>		<b>H/C DOM:</b>																		
<input checked="" type="checkbox"/> A detailed inspection of the following was carried out – <table border="0" style="width: 100%;"> <tr> <td><input type="checkbox"/> All fabric, Velcro &amp; stitching</td> <td><input type="checkbox"/> 3-ring release system</td> </tr> <tr> <td><input type="checkbox"/> Main lift web</td> <td><input type="checkbox"/> Closing loops</td> </tr> <tr> <td><input type="checkbox"/> Chest &amp; leg straps</td> <td><input type="checkbox"/> Main deployment pouch / pocket / housing</td> </tr> <tr> <td><input type="checkbox"/> Harness, hardware &amp; connectors</td> <td><input type="checkbox"/> Reserve handle, ripcord, pockets &amp; housing</td> </tr> <tr> <td><input type="checkbox"/> Container flaps &amp; grommets</td> <td><input type="checkbox"/> Cutaway handle, cables, pocket &amp; housing</td> </tr> </table>			<input type="checkbox"/> All fabric, Velcro & stitching	<input type="checkbox"/> 3-ring release system	<input type="checkbox"/> Main lift web	<input type="checkbox"/> Closing loops	<input type="checkbox"/> Chest & leg straps	<input type="checkbox"/> Main deployment pouch / pocket / housing	<input type="checkbox"/> Harness, hardware & connectors	<input type="checkbox"/> Reserve handle, ripcord, pockets & housing	<input type="checkbox"/> Container flaps & grommets	<input type="checkbox"/> Cutaway handle, cables, pocket & housing								
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<b>Container Comments:</b>																				
<b>Reserve System Details</b>																				
<b>Reserve Canopy Make/Model:</b>																				
<b>Reserve Canopy Serial No.:</b>		<b>Canopy DOM:</b>																		
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<b>AAD Details</b>																				
<b>AAD Make/Model:</b>	<b>AAD Serial No.:</b>	<b>AAD DOM:</b>																		
<b>Batteries Due:</b>	<b>Maintenance Due:</b>	<b>Retirement Due:</b>																		
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<b>AAD Comments:</b>																				
<b>Section 3: Condition Statement</b>																				
<input checked="" type="checkbox"/> In the opinion of the inspector, the listed equipment is in the following condition – <table border="0" style="width: 100%;"> <tr> <td><input type="checkbox"/> Excellent</td> <td><input type="checkbox"/> Good</td> <td><input type="checkbox"/> Satisfactory</td> <td><input type="checkbox"/> Poor</td> <td><input type="checkbox"/> Unserviceable / Unairworthy <i>(if ticked, do not sign below)</i></td> </tr> </table>			<input type="checkbox"/> Excellent	<input type="checkbox"/> Good	<input type="checkbox"/> Satisfactory	<input type="checkbox"/> Poor	<input type="checkbox"/> Unserviceable / Unairworthy <i>(if ticked, do not sign below)</i>													
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Whilst the equipment has been inspected with all reasonable care, the inspector's signature below does not give or imply a guarantee that the equipment is free from defects other than identified above. The next inspection is due within seven (7) months from the date below, or in accordance with the requirements of the local authority where the equipment is to be used. By signing below, the inspector certifies that, in respect of the work carried out,																				
(a) The equipment is airworthy and serviceable; and (b) They are suitably qualified and current to carry out the work described; and (c) The work was carried out in accordance with all applicable NZPIA standards and procedures.																				
<b>Inspected by (PT name):</b>		<b>NZPIA PT #:</b>																		
<b>Signature:</b>		<b>Date work carried out:</b>																		

NOTE: This form is part of the maintenance record for the specified equipment; a copy should be retained by the customer until the work is superseded.