

# MAINTENANCE PROGRAM AIRBUS HELICOPTERS EC 130 T2

## Appendix C11 – Specific Periodic Inspection 1800 FH

Reg. Mark	: PK - _____	Date	: _____
MSN	: _____	Station	: _____
TSN / CSN	: _____	WO No.	: _____

ITEM CODE NO.	CHAPTER	TASK	ENGINEER'S SIGNATURE, STAMP & DATE
25/11/00 /000/000 /010	25-11	<b>Energy absorption front seat</b> SICMA 159. Detailed check. DI <a href="#">AMM 25-21-00, 6-7</a>	
25/11/00 /000/000 /060	25-11	<b>Energy absorption front seat</b> SICMA 198. Detailed check. DI <a href="#">AMM 25-21-00, 6-3</a>	
25/21/00 /000/000 /090	25-21	<b>Rear seat</b> SICMA 284. Detailed check. DI <a href="#">CMM 25-12-32</a>	
25/21/00 /000/000 /100	25-21	<b>Rear seat - Fitting</b> SICMA 284. Detailed check. DI <a href="#">AMM 25-22-01, 6-1</a>	
*** End of Appendix C11 Items ***			

PERSONNEL PARTICIPATING IN THIS INSPECTION			
NAME	POSITION	SIGNATURE	LICENSE NUMBER

RETURN TO SERVICE			
<p>The work recorded above has been carried out in accordance with the requirements of the Civil Aviation Safety Regulation for the time being in force and in that respect the aircraft is consider fit for Release to Service.</p>			
Name	: _____	Stamp	: _____
Signature	: _____	Place/Date	: _____