



AIRCRAFT FLIGHT MAINTENANCE LOG

10070

DATE: 21-01-2021

A/C REG. PK-SNN

MSN: 208-00556

TYPE: C208

PAGE:

CREWS			ROUTE		BLOCK			T/O	LDG	FLT		LDG/ CYCLE	FUEL		RECEIPT NO	ADDED OIL HYD	
	FROM	TO	OFF	ON	HRS	MIN			HRS	MIN		REM	UPLIFT	TOTAL			
CAPT :	R. KUNTARDI	TMK	KBF	20.59	21.57	00	52	21.01	21.50	00	49	1	1200		1200		
COPILOT :	BIYAN	KBF	TMK	22.05	22.48	00	43	22.06	22.47	00	41	1	925		825		
ENG :		TMK	NKO	00.05	00.43	00	38	00.06	00.42	00	36	1	692	158	850	A078147	
		NKO	TMK	01.00	01.35	00	35	01.01	01.37	00	33	1	675		675	A078245	
TIME :	20:30	03:40	TMK	KBF	01.51	02.41	00	50	01.52	02.40	00	48	1	800	620	1100	A078245
STATION :	TIM	TIM	KBF	TIM	02.52	03.35	00	43	02.53	03.37	00	41	1	800		800	A078245
LIC. NO. :	9632	9632															
Sign & Stamp :																	
I hereby certify that the aircraft has been maintained in accordance with applicable manuals & CASR, and determined to be in airworthy condition and safe for flight			TTL BLOCK TIME:			4	21	TTL FLT TIME & LDG:			4	08	6				
AIRCRAFT TIME														APU		ECTM Manual Entry (if required)	
	A/F Total Hrs	Landing	Eng. #1 Hrs	Eng. #1 Cyc	Prop. #1 Hrs	Eng. #2 Hrs	Eng. #2 Cyc	Prop. #2 Hrs	Hours	Cycles	Time	: 21.20 UTC					
Brought Fwd	2708:10	2408	2708:10	2408	918:08						Altitude	: 13500					
This Page	04:08	6	04:08	6	04:08						IAS	: 130					
Total	2712:18	2414	2712:18	2414	922:16						TQ/ EPR	: 1373					
Metric	2712:13		2712:13		922:16						ITT/EGT	: 771					
No	DISCREPANCIES (write NIL or A/C OK if No Defect)		No	CORRECTIVE ACTION						Sign, Stamp & Date		NG/N2	: 98.6				
												NP/N1	: 1900				
												F/F	: 322				
												Oil Temp.	: 73				
												Oil Press	: 51				
												OAT	: 2				
												Last Compressor Wash C/O					
												Date	: 20 JAN 2021				
												PERIODIC INSPECTION					
												Last Insp C/O at	: 2697:00 Hrs				
												Type of Insp	: 100 Hrs				
												Next Inspection					
												Type Insp	: 200 Hrs				
												Due at	: 2800 Hrs				
No	COMPONENT CHANGE (Description)		QTY	P/N On:	P/N Off:	S/N On:	S/N Off:	LIC NO. & SIGN									

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