



# MAINTENANCE PROGRAM AIRBUS HELICOPTERS EC 130 T2

## Appendix C05 – Specific Periodic Inspection 18 Months

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

ITEM CODE NO.	CHAPTER	TASK	ENGINEER'S SIGNATURE, STAMP & DATE
25/67/00 /000/000 /075	25-67	<b>Floats</b> Check. Interval starting from the date of manufacture. DI <b>CMM 25-69-20</b> <b>INSPECTION/CHECK</b> <b>§4</b>	
*** End of Appendix C05 Items ***			

PERSONNEL PARTICIPATING IN THIS INSPECTION			
NAME	POSITION	SIGNATURE	LICENSE NUMBER

### RETURN TO SERVICE

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.

Name	:	_____	Stamp	:	_____
Signature	:	_____	Place/Date	:	_____