



PT. SMART CAKRAWALA AVIATION

WORK ORDER

Form: SCA/MTC/030

Subject : Inspection 12 Months CVDR Read Out	No.	WO/033-SNP/I/2023
	Date	24 January 2023
	A/C Reg.	PK-SNP C208B-5495
Reference : MP C208B ISSUED 01	Prepared By	TS
	Checked By	CI
	Approved By	TM
To : Engineer In Charge		
Description : 1. Perform Inspection 12 Months CVDR Read Out 2. Make an entry in Maintenance Log. 3. Return the Completed Work Order and Form to PPC. #If any finding, please close the routine card, and transferred to inspection card.		
Additional Work : 		
Compliance Statement	Sign & Date Company Lic. No.: (Engineer In Charge)	Signature (Technical Manager)

AIRCRAFT CHECK WORK SUMMARY
(Form: SCA/MTC/051)

DATE OF ISSUED	JO/WO #	TYPE OF MAINTENANCE	DATE OF ACCOMPLISHED		
24 Jan 2023	WO/033-SNP/I/2023	Inspection 12Mths CVDR Readout			
A/C Type	Mfg. Serial Number	A/C Registration			
C208B	C208B-5495	PK-SNP			
AIRCRAFT DATA					
Subject	Pos #	Serial Number (SN)	TTSN/TCSN		
Engine	#1	PCE-VA0723			
	#2	-			
Propeller/Rotor	#1	181158			
	#2	-			
Landing Gear	NLG				
	LH MLG				
	RH MLG				
PACKAGE COVERED					
No	Subject	Qty	Remark		
1	Non-Routine Card	2	01, 02		
2	Inspection Card	1			
3	Work Order	1			
4	Summary Inspection List	1			
5	Material and Tool List	-			
6	Escalation form	-			
7	CRS (SMI / Unscheduled Maintenance)	1			
INSPECTION CARD (IC) LIST (Finding during maintenance)					
No	Taskcard Ref	Subject	Status		Name/ Sign & Stamp
			Open	Close	
<u>IC-001</u>					
<u>IC-002</u>					
<u>IC-003</u>					
<u>IC-004</u>					
<u>IC-005</u>					
<u>IC-006</u>					

<u>IC-007</u>					
<u>IC-008</u>					
<u>IC-009</u>					
<u>IC-010</u>					
<u>IC-011</u>					
<u>IC-012</u>					
<u>IC-013</u>					
<u>IC-014</u>					
<u>IC-015</u>					

Prepared by :
Technical Support



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Hani

Checked by :
Chief Maintenance



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Verified by :
Chief Inspector



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Yanuar

Approved by :
Technical Manager



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SUMMARY INSPECTION ITEMS
(Form: SCA/MTC/050)

WO Ref: WO/033-SNP/I/2023

NO.	TASK CARD NO.	DESCRIPTION	DATE	EST MHR	NAME	STAMP
1	B06	12 MTHS CVDR READ OUT				



PT. SMART CAKRAWALA AVIATION

CERTIFICATE RETURN TO SERVICE

SCHEDULED MAINTENANCE INSPECTION (CRS-SMI)

A/C TYPE : CESSNA 208B

TTSN :

A/C REG : PK-SNP

TCSN :

MSN : C208B-5495

DATE :

TYPE OF INSPECTION : INSPECTION 12 MTHS CVDR READ OUT

DUE AT : ANNUAL

REF : MP C208B ISSUED 01

EXCEPTION

AUTHORIZED PERSON


I hereby certify that this aircraft has been maintained accordance with CASR and Maintenance Program.
Aircraft safe and airworthy for flight

NAME	CAT	AMEL/OTR NO	SIGN&STAMP	DATE
	AIRFRAME & POWER PLANT			
	EIRA			

THE NEXT DUE TYPE OF INSPECTION :

DUE AT :

Form: SCA/MTC/049

	INSPECTION CARD (Form: SCA/MTC/ 048)	TECHNICAL DEPARTMENT
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1. CARD #	2. JO/WO #	3. ORIGINATOR	4. CARD REF	5. DATE
6. A/C REG/MSN	7. A/C TYPE	8. TRADE	12. VENDOR ORDER #	
9. ZONE	10. STA	11. MTC TYPE		

13. DESCRIPTION/DEFECT-IF FINDING OF CPCP INSPECTION, PLEASE COMPLETE SET. 20	14 PPC/ENG	15 DATE

16. CORRECTIVE ACTION	17 MECH	18 ENG. LIC	19 DATE
Performed at A/C TT : A/C TC /LDG :			

20. CORROSION INFORMATION					
LOCATION	CAUSE OF DAMAGE				
	<input type="checkbox"/> Environment				
	<input type="checkbox"/> Internal Leakage				
CORROSION <input type="checkbox"/> Isolated <input type="checkbox"/> Widespread	<input type="checkbox"/> Chemical Spill				
CORROSION LVL <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3	<input type="checkbox"/> LAV/Galley Spill				
PROPOSED ACTION <input type="checkbox"/> Doublers	<input type="checkbox"/> Blocked Drain				
<input type="checkbox"/> Others	<input type="checkbox"/> Wet Insulation Blanket				
	<input type="checkbox"/> Other				

21. If the defect is RII, Please Sign this card finally by RII Inspector	INSP	DATE
NOTICE OF INSPECTOR		

22. PARTS REQUIRED						
PART DESCRIPTION	PART NO	QTY	SERIAL NO		STATUS	
			ON	OFF	CLOSE	OPEN

23. TOOLS REQUIRED			
DESCRIPTION	PART NO. / MODEL	NEXT CALIBRATION DATE	STATUS



MAINTENANCE PROGRAM CESSNA 208/208B

Appendix B06 – Readout & Inspection CVDR System

CVDR System Readout & Inspection

- Each Listed Inspection Item is to be performed in accordance with the AMM and any other applicable publications.
- This equipment should be inspected within **12 Calendar** after last inspection.
- Reference CASR Part 91 Appendix F.

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

NO.	TASK	SIGNATURE	
		ENGINEER SIGN&STAMP	RII SIGN&STAMP
01	<p>FA2100 CVDR Unit</p> <p>Visually inspect the FA2100 CVDR (and ULD), GSD41, accelerometer, potentiometer, impact switch, summing amplifiers, and area microphone for security of installation, undue deterioration and wear, corrosion or any other form of damage. Check that these components are clean and nameplates are legible. Visually inspect the associated electrical connectors and strain reliefs at the mounting trays. Check for cleanliness, unwarranted looseness, foreign material, properly installed clamp points, wire damage, and bend radius. Visually inspect the associated wiring for signs of wire degradation, evidence of broken, charred or corroded wiring. Look for evidence of: moisture or fluids contamination, wire discoloration due to contamination or heat, wire damage resulting from vibration (under clamps and tie straps), damage due to improper maintenance, and damage due to foreign material. If any wire degradation is detected, identify and eliminate the cause leading to wiring degradation.</p> <p>RESULT: _____</p>		

Appendix B06 – Readout & Inspection CVDR System

NO.	TASK	SIGNATURE	
		ENGINEER SIGN&STAMP	RII SIGN&STAMP
02	FA2100 CVDR System Readout/Download and analyze at least one entire flight's data and audio recording. Downloading and testing procedures are listed in Section 6.1.2 of this report or in Section 4 of the L-3 Communications FA2100 CVDR Installation and Operation Instruction Manual (P/N 165E1847-01). RESULT: _____		
03	CVDR BATTERY Check CVDR battery expiry date and record. ____/____/_____. Replace CVDR battery (if required). P/N OFF _____. S/N OFF _____. P/N ON _____. SN ON _____. New Battery Expiry Date ____/____/_____.		

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 : _____ Place/Date : _____

Sign & Stamp : _____