



<b>APRON INSPECTION</b>							
REF:.....							
OPERATOR:..... AOC #:.....							
PLACE OF INSPECTION:..... DATE:.....							
<b>CREW</b>							
PILOT IN COMMAND:..... CO-PILOT:.....							
FLIGHT ENGINEER:..... SENIOR ATTENDANT:.....							
<b>AIRCRAFT</b>							
MAKE AND MODEL ..... HOURS SINCE LAST INSPECTION:.....							
REGISTRATION MARKS:..... DATE OF LAST INSPECTION:.....							
FLIGHT NO:..... FUEL ON BOARD:.....							
ORIGIN:..... DESTINATION:..... VIA:.....							
<b>DISPATCHING - TYPE OF CLEARANCE</b>				<b>SAT</b>	<b>UNSAT - ACTION TO BE TAKEN</b>		
REQUIRED	<input type="checkbox"/>	IFR	FILED	<input type="checkbox"/>	IFR		
	<input type="checkbox"/>	VFR		<input type="checkbox"/>	VFR		
Compliance with fuel requirements							
Weather information							
Preparation of flight manifest							
Method of operational control							
<b>FLIGHT CREW INFORMATION</b>							
Licenses, ratings, currency, medical							
On duty time							
Flight time							
Flight equipment							
<b>LOADING</b>							
Passenger control							
Cabin baggage							
Cargo location and security							
Refueling procedures							
Mass and balance calculations							
Ground servicing procedures							
<b>MANUAL/DOCUMENTS</b>							
Operations manual							
Flight or journey log							
Maps, charts, instrument approach charts							
Navigation logs							
Checklists							
Aircraft registration certificate							
Certificate of airworthiness							
Radio license							
AOCs and SOPs							



AIRCRAFT	SAT	UNSAT - ACTION TO BE TAKEN
Communication equipment		
Navigation equipment		
First aid kits		
Fire extinguishers		
Life jackets		
Rafts/slides		
Emergency radio/survival equipment		
Emergency exits accessible		
Seats and safety belts		

**FOR OFFICIAL USE ONLY**

REMARKS:.....  
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DISCREPANCIES OBSERVED:.....  
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NAME OF PERSONNEL BRIEFED:.....  
 .....  
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CORRECTIVE ACTION REQUIRED:.....  
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LETTER OF CORRECTION SENT:.....

OPERATOR'S RESPONSE RECEIVED/ACCCEPTED:.....

CORRECTIVE ACTION ACCOMPLISHED:.....

FOLLOW-UP INSPECTION DATE:.....

CLOSE-OUT DATE:..... or PURSUE VIOLATION ACTION:.....

.....  
 Inspector's Name & ASI # Signature Date