

Customer:		Repair Order:		QC
P/N:		S/N:		
Nomenclature:		OEM:		
Work Order:		Shop:		
Customer Workscope:				
Regulatory Authorities: FAA: <input type="checkbox"/> EASA: <input type="checkbox"/> UK-CAA: <input type="checkbox"/> CAAC: <input type="checkbox"/> Military: <input type="checkbox"/> Config. Audit Req: <input type="checkbox"/> Hidden Damage: <input type="checkbox"/>				
Customer Discrepancy: If additional information is required, please review the Work Order Package, and / or the Standard Contract Information available from the PAI System. If additional information is required contact				
Time/Cycles:				
				Rev Check Employee #:
				Date:
1. Perform Preliminary Visual Inspection.				QC
Teardown: 2. Configuration inspection (If Applicable). 3. Review required ADs, SBs, MOs, EOs and other customer requirements. 4. Pre-Test unit. Verify Warranty Status. Calibrated Equipment used: _____ _____ _____				Mechanic
				Oversight
5. Disassemble, clean, inspect. Outside Service <input type="checkbox"/> 6. Perform Fits and Clearances as required per current technical data. Needed Fits & Clearances Calibrated Equipment: _____ _____ _____				
7. Request special processes as required per applicable technical data.				



Reassembly: 8. Assemble unit in accordance with current technical data.		Mechanic
Calibrated Equipment Used: _____ _____ _____		Oversight
9. Confirm required ADs, SBs, MOs, EOs and other customer requirements met. <div style="text-align: right;"> ADs Incorporated <input type="checkbox"/> SBs C/W <input type="checkbox"/> Customer Reqs <input type="checkbox"/> </div>		
10. Test unit in accordance with current technical data. Record test findings as required on Form PAI2001 or attach applicable test data sheets.		Mechanic
Calibrated Equipment Used: _____ _____ _____		Oversight
11. Verify all applicable safeties, and torque seals. Review all paperwork for correctness and ensure proper completion of Form PAI2001. Verify part number and serial number on unit match documentation to include modification status, if applicable.		
Mechanic Signature: Date:	Oversight Mechanic Signature: Date:	Oversight Mechanic Certificate Number:
12. Perform Final Inspection. Verify all applicable safeties, and torque seals, and free from FOD. Review all paperwork for correctness and ensure proper completion of Form PAI2001. Verify part number and serial number on unit match documentation to include modification status.		QC
13. SHIPPING ONLY: Confirm Part Number and Serial Number at top of page with component prior to packaging.		Shipping