



AIRCRAFT ENGINES

CUSTOMER SERVICE INFORMATION REPORT

OPER. Control No.

ATA Code

1. A/C Reg. No.

8. Comments (Describe the malfunction or defect and the circumstances under which it occurred. State probable cause and recommendations to prevent recurrence.)

Enter pertinent data	MANUFACTURER	MODEL/SERIES	SERIAL NUMBER
2. AIRCRAFT	<input type="text"/>	<input type="text"/>	<input type="text"/>
3. POWERPLANT	ROTAX	<input type="text"/>	<input type="text"/>
4. PROPELLER	<input type="text"/>	<input type="text"/>	<input type="text"/>

5. SPECIFIC PART (of component) CAUSING TROUBLE

Part Name	MFG. Model or Part No.	Serial No.	Part/Defect Location
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

6. ENGINE COMPONENT (Assembly that includes part)

Engine/Comp. Name	Manufacturer	Model or Part No.	Serial Number
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Engine TSN	Engine TSO	Engine Condition	7. Date Sub.
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Large yellowed area for comments, mostly illegible.

Optional Information:

Check a box below, if this report is related to an aircraft

Accident; Date Incident; Date

DISTRICT OFFICE	OPERATOR DESIGNATOR
OTHER <input type="checkbox"/>	SUBMITTED BY: _____
COMMUTER <input type="checkbox"/>	
ACG <input type="checkbox"/>	
MFG <input type="checkbox"/>	
AIR TAXI <input type="checkbox"/>	
MECH <input type="checkbox"/>	
OPER <input type="checkbox"/>	
REP. STA <input type="checkbox"/>	TELEPHONE NUMBER: () _____