Aerodyne Research, LLC • 1407 Flightline Blvd. Unit 14. Deland, FL 32724 USA
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MAINTENANCE AND REPAIR FORM

- Please Print Clearly - Date:

CONTACT INFORMATION			
First Name:	Last Name:	Home:	Cell:
		Work:	Fax:
Are you the owner? ☐ Yes ☐ No	If you are not the owner of this equipment, please fill out the Owner Information section below.	Relationship to owner: ☐ Rigger ☐ Equipment Dealer ☐ Friend/Relative ☐ Other	
Email Address:			

OWNER & EQUIPMENT INFORMATION						
First Name:		Last Name:		Model Number	Serial Number:	DOM:
Address:			City:	State:	Zip/Postal:	Country:
Original Owner ☐ Yes ☐ No	Weight: ☐ LBs ☐ KGs	Height: ☐ ft/in ☐ m/cm	Equipment Type: ☐ Canopy ☐ Reserve ☐ Icon		Pilot Chute, Size & Type: ☐ F-111 ☐ Zero P	
Total # of Jumps:	Total Jumps on Equipment:	Total Jumps on Lineset:	Previous Canopy:	Home DZ:	Age:	Time in Sport:

SHIPPING INFORMATION **Please note: we ship via UPS or FedEx Ground – signature required.**					
Ship-to Address:	City:	State:	Zip/Postal:	Country:	☐ FedEx ☐ UPS

WORK TO BE DONE		
☐ Inspection ☐ Reline ☐ Repair	Reline Type: ☐ Dacron ☐ Spectra ☐ HMA ☐ ZLX (Zulu)	Special Instructions:

PAYMENT INFORMATION					
Card Type: ☐ Visa ☐ MasterCard ☐ Discover ☐ COD	Name on card:				
	Billing Address:	City:	State:	Zip/Postal Code:	Country:
	Card Number:		CCV #:	Expiration Date:	

Please note: Any equipment with balance due after 60 days from completion of work and reasonable efforts on behalf of Aerodyne Research to received payment will be sold or destroyed as deemed appropriate.