

LSA Major Repair and/or Alteration (MRA) Request Form

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4 AIDODAFT				2 OWNER					
		1. AIRCRAFT		2. OWNER Name (As shown on registration certificate)					
Make:				Name (As s	snown on reg	gistratioi	n certificate)		
Model:									
Serial Number:				Address (As shown on registration certificate)					
Nationality and Registration Ma	rk:								
3. AIRCRAFT DATA									
Equipment Manufacturer		Type/M	Type/Model		mber	Total Time Since New	Total Time Since Overhaul		
Airframe									
Powerplant									
Propeller									
4. WEIGHT AND BALANCE									
Basic E	mpty	Weight (lb.)	А	Arm (in.)			Moment (inlb.)		
			5. EQU	IPMENT LIS	Т				
		List (Currently Installed MF	RAs, Instruction	ons or Noti	fication	S		
ID Number	Rev	Issue Date		Docu	ment Title o	r Descri	ption		
			(1)	. = .					
			(Attach Curre	ent Equipmer	nt List)				
				STED CHAN					
		(Describe all re	equested changes. In	clude specific	parts/mod	els to b	e installed)		



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1 he	portion below to be til	lled out by CubCrafters and returned to the Customer to sign					
7. APPROVAL & ESTIMATE							
Request Approved?	Yes: No:	Justification:					
Estimated Time:	Hours	(# hours) x (\$100/hour) =: \$					
		requested modification to the aircraft, assuming all submitted information is will continue to meet the ASTM requirements for S-LSA certification.					
Disapproval of this request confirms that the request modification will not qualify the aircraft for certification as S-LSA.							
Should the engineering effort on this modification appear to exceed the estimated hours, a revised estimate will be provided prior to the expenditure of the added hours.							
Work will be scheduled after receipt of payment of the estimate or revised estimate. Payment can be made by check, credit card or wire. Please contact us for wiring instructions.							
Accepted:		Date:					