

HARTZELL PROPELLER INC.

ALERT SERVICE BULLETIN APPENDIX

HC-ASBA-61-386

Blades - Shot Peening (Shenyang Avias)

| Compliance Form | | |
|---|--|------------------------|
| Owner Information: | | |
| Name: _____ | Phone: _____ | |
| Address: _____ | Fax: _____ | |
| _____ | Email: _____ | |
| City: _____ | Zip/Postal Code: _____ | |
| State: _____ | Country: _____ | |
| Repair Station: | | |
| Company: _____ | Phone: _____ | |
| Contact Name: _____ | Fax: _____ | |
| Address: _____ | Email: _____ | |
| _____ | | |
| City: _____ | Zip/Postal Code: _____ | |
| State: _____ | Country: _____ | |
| Signature: _____ | | |
| Propeller Information: (TSN= time since new TSO= time since overhaul) | | |
| Propeller Model: _____ | Propeller S/N: _____ | |
| Propeller TSN: _____ | Propeller TSO: _____ | |
| Blade Information: | | |
| Blade Model: _____ | Was the blade shot peened? | Date of blade overhaul |
| Blade #1 S/N: _____ | <input type="checkbox"/> YES <input type="checkbox"/> NO | Date: _____ |
| Blade #2 S/N: _____ | <input type="checkbox"/> YES <input type="checkbox"/> NO | Date: _____ |
| Blade #3 S/N: _____ | <input type="checkbox"/> YES <input type="checkbox"/> NO | Date: _____ |
| Blade #4 S/N: _____ | <input type="checkbox"/> YES <input type="checkbox"/> NO | Date: _____ |
| Blade #5 S/N: _____ | <input type="checkbox"/> YES <input type="checkbox"/> NO | Date: _____ |
| <p>Send this completed and signed form to Hartzell Propeller Inc. Product Support Department: Fax: (001) 937.778.4215 or Email: techsupport@hartzellprop.com</p> <p>DO NOT WRITE BELOW THIS LINE - FOR HARTZELL PROPELLER INC. USE ONLY</p> | | |