

Flying Log & Fatigue Data Sheet

Aircraft Serial No: PA 474

Sheet No: _____

Flight No.	Date	SPC	No. of Displays	No. of Flypasts	Weights			Times				Landings			Station of Landing	Name of Captain (Print)	Flying Hours Since Winter Maintenance
					All Up at Take - Off (lbs) <i>see Note 1 over</i>	Fuel at Take - Off (lbs)	Fuel at Landing (lbs)	Take-Off	Landed	Duration	Total Aircraft Hours	Roller	Full Stop	Total			
	B/F Totals										:						:
1								:	:	:	:						:
2								:	:	:	:						:
3								:	:	:	:						:
4								:	:	:	:						:
5								:	:	:	:						:
6								:	:	:	:						:
7								:	:	:	:						:
8								:	:	:	:						:
9								:	:	:	:						:
10								:	:	:	:						:
11								:	:	:	:						:
12								:	:	:	:						:
Totals to be Carried Forward →																	:

Sortie Profile Codes (SPC)	
Select Code which most closely describes your flight	
30	Air Test
31a	Training / Convex
31b	Training / Asymmetric
31c	Training / Continuation
32	Take-off - Display and Land
35	Composite Sortie
36	Transit Only

Number of Occasions AUW Exceeded 48000 lbs	
Totals Carried Forward →	

Transfer Certificate				
Transfer Certificate I certify that the form is complete, the data is realistic and logical and that the appropriate details, readings & totals have been carried forward to Sheet No: _____	Signature _____ (NCO IC Servicing)			
	Rank and Name _____ (Blk Caps)			
	Time	Day	Mth	Yr

Fatigue Meter Readings

Fit No.	A +0.05g		B +0.45g		C +0.75g		D +1.25g		E +1.55g		F +1.95g		G +2.35g		H +2.65g		Name of Tradesperson (Blk Caps)
	Reading	Diff	Reading	Diff	Reading	Diff	Reading	Diff	Reading	Diff	Reading	Diff	Reading	Diff	Reading	Diff	
1																	
2																	
3																	
4																	
5																	
6																	
7																	
8																	
9																	
10																	
11																	
12																	
Difference Totals																	

Notes

1. All Up Weight at Take-Off to include approximate weight of crew / passengers and weight of miscellaneous baggage. (Data from load trim sheet)

Fatigue Meter	
Mark	Serial No.
Fatigue Meter Cycling (Record Each 10,000 Counts)	
Window:	Date Cycle Completed
1st Cycle	
2nd Cycle	

Inspection Certificate									
I certify that this MOD Form 725 has been inspected for obvious errors and anomalies, and amended where necessary in red ink.	Signature _____ (NCO IC Eng Records)								
	Rank and Name (Blk Caps) _____								
	<table border="1" style="display: inline-table; border-collapse: collapse;"> <tr> <td style="width: 20px;">Time</td> <td style="width: 20px;">Day</td> <td style="width: 20px;">Mth</td> <td style="width: 20px;">Yr</td> </tr> <tr> <td style="text-align: center;">:</td> <td style="text-align: center;">:</td> <td style="text-align: center;">:</td> <td style="text-align: center;">:</td> </tr> </table>	Time	Day	Mth	Yr	:	:	:	:
Time	Day	Mth	Yr						
:	:	:	:						