



RECREATIONAL AVIATION - AUSTRALIA INC

ABN 40 070 931 645

PO Box 1265  
Fyshwick ACT 2609

3/1 Pirie Street  
Fyshwick ACT 2609

## AUF AMATEUR BUILT AIRCRAFT FLIGHT TEST PERIOD FINALISATION FORM

**Aircraft Registration Number:** .....

**Inspector Name and Phone Number:** .....

**Aircraft Type and Model:** .....

**Builder:** .....

**Date of First Flight:** .....

**Date Test Period Completed:** .....

**Hours Flown to Date:** .....

**Details of Significant Problems:** .....

### CERTIFICATION

*I hereby certify that I have fabricated and assembled at least the major portion (51%) of the aircraft identified above for educational and recreational purposes and that it has:*

**A weighed Empty Weight of:**.....

**On (Date of Weighing):**.....

**Fitted with (Removable Equipment or Components installed at weighing):**.....  
.....  
.....

**A Stall Speed In Landing Configuration of:**.....

**Signature:**.....

**Name (Print):**.....

**Date:**.....