

AIRCRAFT LOGBOOK REQUEST FORM

Instructor:			
City:	State:	Zip Code:	
Aircraft N#:			
Date Requested:			
Received By LE Avia	tion Employee:		
Date Returned:			
Returned to LE Avia	tion Employee:		

I, ________have requested and received the above aircraft logbooks. I understand that care and security of these aircraft logbooks while in my procession is my responsibility. I agree to assume financial responsibility for the logbooks in the event of loss or damage of any kind. Financial responsibility includes but is not limited to any and all costs associated with repair, recreating the logbooks, and any loss in aircraft value due to the loss or damage of the above logbooks. Burdon of proof for the return of the logbooks is mine.

Customer Signature

Date