

Revision: 6 9-25-2015

## Weight & Balance Form

Name:				Instructor:		
Aircraft Type:				Aircraft Number:		
1	Weight	Arm	Moment	Max Gross Weight:	Actual Weight:	ı
Aircraft				Useful Load:	SOLO or DUAL	Flight?
			1	Take Off Distance:	Landing Distance:	<u> </u>
				CG Limits Forward:	Aft: Actual:	
Pilot & Front Pass				Glide Speed @ Current Weight:	Va @ Current Weig	ht:
Mid Passengers			1	Fuel Endurance @ 8000msl ISA w		
Rear Passengers				Density Altitude:		
Aft Bag #1				Multi: Single Engine Climb:	Accelerate Stop Dis	stance:
Aft Bag #2			1	Departure Time:	Return Time:	
Fuel (6 lbs per gallon)				Route of Flight:		
Total				Within Weight? YES or NO	Within CG? YES	or NO
SAFETY ASSESMENT QU	JESTIONAIR		-			
1. Have you checked NOTAMS and TFR's today?					yes	no
2. Do you have the current and forecast weather?					yes	no
3. Have you completed the IMSAFE checklist?					yes	no
4. Is the aircraft in an airworthy condition?					yes	no
5. Are all the required documents on board the aircraft you intend to fly?					yes	no
6. Are you in compliance with CFR91.103?					yes	no
7. Have you checked the local safety board?					yes	no
8. Do you have enough fuel and fuel reserve for the intended flight?					yes	no
9. Are all required endorsements current?					yes	no
Customer Signature					Date:	

Note: Prior to any intended flight this weight & Balance form must be completed and signed by the Pilot and a copy left with Leading Edge Aviation dispatch.