

AIRCRAFT DISPOSAL REQUEST

OAS-75 (8/2013)

1. Bureau/Agency:		2. Year, Make and Model of Aircraft:	
3. FAA Registration, "N" number:	4. SN:	5. Date of Airworthiness Certificate:	
6. Do you wish to reserve the N number? Y <input type="checkbox"/> N <input type="checkbox"/>	7. Expected Price: \$	8. Has the Bureau/agency screened the aircraft for internal reassignment? Y <input type="checkbox"/> N <input type="checkbox"/>	
9. Has the aircraft been operated outside of its original types certificate (if yes, explain?)			
10. Operational Questions			
a. Does the aircraft have damage history (if yes describe with an attached sheet?)		a.	Y <input type="checkbox"/> N <input type="checkbox"/>
b. Are all Bureau identification and/or markings removed (i.e. logo or crest)?		b.	Y <input type="checkbox"/> N <input type="checkbox"/>
c. Has the aircraft been operated in a corrosive environment?		c.	Y <input type="checkbox"/> N <input type="checkbox"/>
d. Does the Bureau/Agency intend to replace the aircraft?		d.	Y <input type="checkbox"/> N <input type="checkbox"/>
e. Is the aircraft equipped for Floats?		e.	Y <input type="checkbox"/> N <input type="checkbox"/>
f. Is the aircraft equipped for Skis?		f.	Y <input type="checkbox"/> N <input type="checkbox"/>
g. Has the aircraft been operated on water w/floats?		g.	Y <input type="checkbox"/> N <input type="checkbox"/>
			Salt water
			Fresh water
h. Are you planning on removing any installed equipment (if yes, provide list?)		h.	Y <input type="checkbox"/> N <input type="checkbox"/>
i. Does the aircraft have a current annual inspection?		i.	Y <input type="checkbox"/> N <input type="checkbox"/>
11. Is the aircraft being offered under exchange sale authority? Y <input type="checkbox"/> N <input type="checkbox"/>		12. Location of the aircraft (city/state/ FAA airport identifier):	
12. The following information shall be included with this form when submitted to OAS <input type="checkbox"/> Verified equipment list <input type="checkbox"/> Current digital photos of aircraft from all views			
Current Equipment List (attach list if additional room needed)			
Item		Part No.	Serial No.
13. Submitted By:			
Name/Title		Date	
14. Program/Regional Director concurrence:			
Name/Title		Date	
15. National Aviation Manager concurrence:			
Name/Title		Date	
16. Executive Aviation Committee Member concurrence:			
Name/Title		Date	
17. OAS Director Approval			
Name/Title		Date	