

PURCHASE ORDER

PO#:		Date:
Individual / Company Name:		
Contact:	Phone:	Email:
Ship to Address:		
Return Shipping Instructions:		* carriers only provide \$100 insurance & replacemen value can be significantly higher than the reweb cost
Service Type:	Shipping Insurance:	Ins. Amount:
Billing: You will be sent a payme	nt link when your order is ready to	ship.
Contact (if different fro	m above):	
Phone:	Email:	
Aircraft Info:		
Manufacturer:	Model:	
Registration #:	Serial #:	
Webbing Color Choice:		
-	or from the selection on our color pa ve will attempt to match.	ge or include a piece of material in
Work Instructions:		
→ Reweb the belts per	applicable TSO and/or FAA approve	d Repair Specification requirements.
Additional Comments:		
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Aviation Safety Products, Inc. 41 Easterling Rd., Blairsville, GA 30512 800.480.4816 706.835.1325 fax 706.835.2424 orders@AircraftSeatBelts.com