

VisionSafe Corporation

EVAS BIENNIAL INSPECTION

NEXT SERVICE DUE NOTIFICATION

Your EVAS Unit is due for Biennial Inspection on the date reflected on the front of the container. If this form is preprinted, the date is shown in the Service Due Date space below. The cost for Biennial Inspection of each EVAS unit received within +/- 3 months of the Service Due Date, and return shipped to an address within the US for US-registered aircraft, is \$600. Additional cost will be incurred if unit is received beyond the +3 month window, or if service is for other than domestic US aircraft. Service turnaround time is five working days, based on priority one shipping within the US. Shipping charges related to the service unit remain the responsibility of the customer. Customers not providing third party shipping information will be charged for shipping on their final invoice.

Please correct and/or complete information below, and select the proper bill to address. Please fax the completed form to the number listed below, or email to bus.services.ar@visionsafe.com and enclose the original with your EVAS unit. Thank you.

Ship to:

VisionSafe Corporation
Attn: Service Dept.
46-217 Kahuhipa Street
Kaneohe, HI 96744

Fax: (808) 247-6313 Phone: (808) 235-0849 EMAIL: bus.services.ar@visionsafe.com

Aircraft Model: _____

Aircraft Registration Number: _____

Aircraft Serial Number: _____

EVAS Model Number: _____

EVAS Serial Number: _____

Service Due Date: _____

Date Unit Shipped For Service: _____

Requested Return Date: _____

Aircraft Owner Information:

Company: _____

Address: _____

Phone: _____

Contact Name: _____

Fax: _____

E-Mail: _____

Bill To

Aircraft Operator Information:

Name: _____

Phone: _____

Company: _____

Fax: _____

Address: _____

E-Mail: _____

Bill To

Maintenance Facility Information:

Name: _____

Phone: _____

Company: _____

Fax: _____

Address: _____

E-Mail: _____

Bill To

Return Shipping Address:

Shipping Account Information

Company: _____

Company: _____

Dept./Contact: _____

Account Number: _____

Address: _____

Ship Preference: _____

Phone: _____