

NEW FAA-PMA PROJECT REQUEST

Please fill out as much information as possible and email to quality@airgroupamerica.com

Co. Name:	Your Name:						
Tel:	email:						
OEM P/N	Nomen:						
OEM:	OEM LIST Price			Your Target Price:			
Est. Annual Usage Qty:	Replacement Reason			Flight Critical Part?			
Reason for PMA?: (Check all that apply)	Cost Savings	vings Long OEM lead Time		OEM Obsolete or Unsupported		Poor OEM Servic	
	Service Life	e Improvement	Scarce	Aftermarket Surplus	Service Diff	iculty	
NHA P/N:	NHA Model#:			NHA Nomen:			
NHA CMM ATA #		FIG-ITEM#		QTY/UNIT			
Engine, Airframe or I	Propeller Applicatio	ns:					
Operatir	ng Environment Ten	np: F or C:					
Describe Part's func	tion:						
How/why does this	part fail?:						
What happens wher	n it fails?:						
Service Difficulty Exp	perience?:						
Comments							

Date AGA Form PMA_Help-1 REV NC

^{*}It would be very helpful if you could send a photo of the part (new or used)