



MAINTENANCE AUTHORIZATION TO REPAIR

Aircraft Type: _____ Serial Number: _____ Tail Number: _____

Owner: _____ Authorized Representative(s): _____

Address: _____ City, State, Zip: _____

Cell: (____) _____ Office: (____) _____ Home: (____) _____

Date of aircraft induction: _____ Time available for repair: _____ Access keys: Y / N

Work to be performed: _____

PAYMENT TERMS

Martin Aviation policy requires that full payment is received upon completion of work. In addition, when scope of work is estimated to exceed \$10,000, 1/3 of initial estimate is due at induction of aircraft, and 1/3 is due at midpoint of the job. Estimate of final bill is due prior to release of aircraft, with final invoice total being adjusted or credited as appropriate within 10 days.

Approved items not quoted in the estimate will be billed on a time and material basis, per our published labor rates at the time of aircraft induction. All prices quoted herein are exclusive of freight, fuel, flight costs, environmental fees and/or applicable taxes.

Company Name: _____

Cardholder Name: _____

Credit Card Billing Address: _____

City, State, Zip: _____

Credit card Type: __Visa __MasterCard __American Express __Discover

Card Number: _____

Expiration Date (mm/yy): _____

Three Digit Code on Back of MasterCard, Visa, or Discover: _____

Four Digit Code on Front of American Express: _____

I hereby authorize, and if applicable grant the above listed representative to authorize, repair work to be done as described above and further authorize the above scope of work to be charged to my credit card if above payment terms are not met. I understand an authorization hold may be placed on my credit card, prior to work being completed. ANY PAYMENT VIA CREDIT CARD OF INVOICES IN EXCESS OF \$500 WILL BE ASSESSED A 2.3% SERVICE FEE.

I hereby authorize Martin Aviation and its contractors to repair the above discrepancies, using whatever materials are necessary and hereby grant Martin Aviation and/or its employees permission to taxi and operate the aircraft herein described for the purpose of completing said repairs.

I certify that I am authorized to order and pay for the repair of the discrepancies listed above. I further certify I am solely responsible for payment of the repair of the discrepancies and an express mechanics lien is hereby acknowledged on the above aircraft to secure the amount of the repairs hereto.

I have read, understand and agree to the Terms and Conditions on the reverse side of the authorization form.

Signature: _____ Date: _____

SEE REVERSE FOR ADDITIONAL TERMS AND CONDITIONS