

Aircraft Control Systems Multiple Independent Inspection Certificate

MOD Format 707C-M2(Ind)
(Revised May 23)

*	SNOW	Aircraft No.	Day	Mth	Yr

This Form is to be used with MOD Form 707C - M3(Ind)
Instructions for Use are given on the MOD Form 799(Ind)

Sheet No: _____

Entry No. 1	Field 1	Instructions	Certificate of Agreement - Multi-trade Independent I certify that the functional test specified is satisfactory for the trade of _____.		
		A Independent Inspection for correct assembly and functional test required on _____ Control System	Time/Date	Signature	Rank/Name
		In respect of work at _____			Signature
			Rank/Name		Time/Date
		B Independent Inspection for correct assembly and functional test required on _____ Control System	2 Trade	3 Work Undertaken	4 Certificate
				The Independent Inspection required for correct assembly has been specified at Blocks B & C . The functional test has been correctly specified at Block D on MOD Form 707C - M3 SNOW: _____ Sheet No: _____ Lines: _____	Working Hours
					Time/Date
		C Inspection for correct assembly is to be for _____			Signature
		From _____		* Certified Inspection Satisfactorily Completed	Rank/Name
		To _____		* Inspection for correct assembly FAILED Transferred to: _____ Sheet No: _____ Line No: _____	Time/Date
					Signature
					Rank/Name
Entry No. 2	Field 1	Instructions	Certificate of Agreement - Multi-trade Independent I certify that the functional test specified is satisfactory for the trade of _____.		
		A Independent Inspection for correct assembly and functional test required on _____ Control System	Time/Date	Signature	Rank/Name
		In respect of work at _____			Signature
			Rank/Name		Time/Date
		B Independent Inspection for correct assembly and functional test required on _____ Control System	2 Trade	3 Work Undertaken	4 Certificate
				The Independent Inspection required for correct assembly has been specified at Blocks B & C . The functional test has been correctly specified at Block D on MOD Form 707C - M3 SNOW: _____ Sheet No: _____ Lines: _____	Working Hours
					Time/Date
		C Inspection for correct assembly is to be for _____			Signature
		From _____		* Certified Inspection Satisfactorily Completed	Rank/Name
		To _____		* Inspection for correct assembly FAILED Transferred to: _____ Sheet No: _____ Line No: _____	Time/Date
					Signature
					Rank/Name

* Army Use Only

* Delete as appropriate

Entry No. 3	Field 1 Instructions		Certificate of Agreement - Multi-trade Independent I certify that the functional test specified is satisfactory for the trade of _____. Rank/Name _____ Signature _____ Time/Date _____			
	A Independent Inspection for correct assembly and functional test required on _____ Control System	Time/Date _____				
	In respect of work at _____	Signature _____ Rank/Name _____				
	B Independent Inspection for correct assembly and functional test required on _____ Control System	2 Trade	3 Work Undertaken		4 Certificate	
	C Inspection for correct assembly is to be for _____		The Independent Inspection required for correct assembly has been specified at Blocks B & C . The functional test has been correctly specified at Block D on MOD Form 707C - M3 SNOW: _____ Sheet No: _____ Lines: _____		Working Hours _____	Time/Date _____
From _____		* Certified Inspection Satisfactorily Completed		Signature _____		
To _____		* Inspection for correct assembly FAILED Transferred to: _____ Sheet No: _____ Line No: _____		Rank/Name _____		
Entry No. 4	Field 1 Instructions		Certificate of Agreement - Multi-trade Independent I certify that the functional test specified is satisfactory for the trade of _____. Rank/Name _____ Signature _____ Time/Date _____			
	A Independent Inspection for correct assembly and functional test required on _____ Control System	Time/Date _____				
	In respect of work at _____	Signature _____ Rank/Name _____				
	B Independent Inspection for correct assembly and functional test required on _____ Control System	2 Trade	3 Work Undertaken		4 Certificate	
	C Inspection for correct assembly is to be for _____		The Independent Inspection required for correct assembly has been specified at Blocks B & C . The functional test has been correctly specified at Block D on MOD Form 707C - M3 SNOW: _____ Sheet No: _____ Lines: _____		Working Hours _____	Time/Date _____
From _____		* Certified Inspection Satisfactorily Completed		Signature _____		
To _____		* Inspection for correct assembly FAILED Transferred to: _____ Sheet No: _____ Line No: _____		Rank/Name _____		

* Delete as appropriate