

## TEST ORDER FORM

### MAJOR REPAIR/ALTERATION

Seat Fireblock Testing

**Your Information:**

Name: \_\_\_\_\_ Company: \_\_\_\_\_  
Address: \_\_\_\_\_ City, State, Zip: \_\_\_\_\_  
Email: \_\_\_\_\_ Phone Number: \_\_\_\_\_  
Purchase Order: \_\_\_\_\_ Data in Support of:  Major Repair  Major Alteration

**Aircraft Information:**

Make: \_\_\_\_\_ Model: \_\_\_\_\_  
Serial: \_\_\_\_\_ Registration: \_\_\_\_\_  
Operational Type:  Part 91 (General)  Part 135 (Commuter/On-Demand)  Part 121 (Scheduled Carrier)

**Detailed Description of Project:**

*(Example: 6 Single & Double Seats:  
Dress Cover change only. 2 Divans:  
Dress Cover & Foam change. Headliner  
and carpet replaced.)*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Special Instructions:**

\_\_\_\_\_  
\_\_\_\_\_

By signing below, I certify all information submitted in this package is true and correct to the best of my knowledge.

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Date**

**Please mail the following items to the address listed at the top of this form.**

1. A copy of this form.
2. Additional information, paperwork, and/or materials as required by the relevant Steps listed in this form.
3. For 16g Seats: Pictures of the seat and pictures of the seat tags.
4. Test samples. *(Must meet the requirements of the applicable regulation. Contact us if you need guidance.)*

## Step 1: Seat Information

**1. Enter the number of seats being modified in the aircraft for each category.**

Crew Seats: _____	Flight Attendant Seats: _____
Single Passenger Seats: _____	Double Passenger Seats: _____
Divans: _____	Lav Seats: _____

**2. What are the seats certified to?**

- TSO C-39 (9g)
- 14 CFR 25.562 (16g)
- TSO C-127 (16g)

**3. How many sewable fabric tags do you need?** \_\_\_\_\_

**4. For 16g seats only, how many metal TSO replacement tags do you need?** \_\_\_\_\_

**5. For 16g seats only, provide the information below for all seats being modified.**

Seat Manufacturer: \_\_\_\_\_

Seat Part Numbers	Seat Serial Numbers	Seat Part Numbers	Seat Serial Numbers

**Who is fabricating the seat cushion test samples?**

- I will fabricate the seat cushion test samples.
- I will fabricate the seat cushion test samples but need guidance and/or instructions. (We will contact you.)
- Aeroblaze will fabricate the seat cushion test samples.

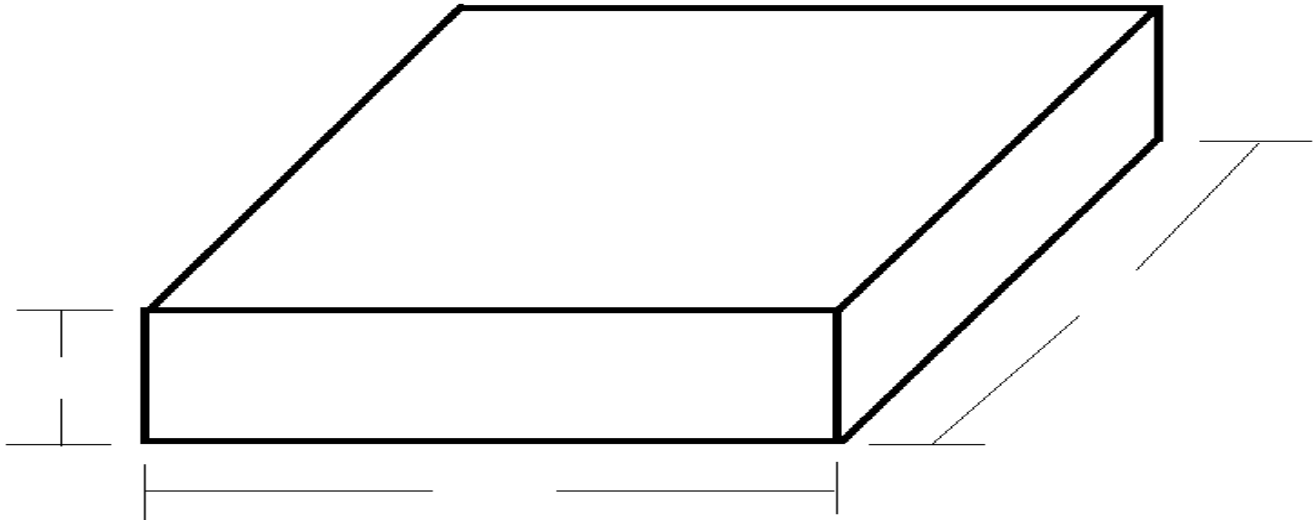
## Step 2: Production Seat Cushion Build-up

\*\*Complete one sheet for each different production cushion build-up\*\*

Cushion Type: \_\_\_\_\_

(e.g. Single Passenger Seat Back or Crew Seat Headrest)

Sketch the build-up of the cushion below:



Material	Manufacturer	Part Number	New or Existing Material	
Dress Cover			<input type="checkbox"/> New	<input type="checkbox"/> Existing
Batting/Sew-Foam			<input type="checkbox"/> New	<input type="checkbox"/> Existing
Muslin			<input type="checkbox"/> New	<input type="checkbox"/> Existing
Fireblock Layer			<input type="checkbox"/> New	<input type="checkbox"/> Existing
Foam			<input type="checkbox"/> New	<input type="checkbox"/> Existing
Hook Fastener			<input type="checkbox"/> New	<input type="checkbox"/> Existing
Loop Fastener			<input type="checkbox"/> New	<input type="checkbox"/> Existing
			<input type="checkbox"/> New	<input type="checkbox"/> Existing
			<input type="checkbox"/> New	<input type="checkbox"/> Existing
			<input type="checkbox"/> New	<input type="checkbox"/> Existing
			<input type="checkbox"/> New	<input type="checkbox"/> Existing
			<input type="checkbox"/> New	<input type="checkbox"/> Existing

Fabrication Method: \_\_\_\_\_

\_\_\_\_\_

(**Example:** Fireblock layer fully encapsulated and bonded to foam. Dress cover has batting and muslin sewn underneath. Hook fasteners sewn to dress cover.)

If glue is being used, list the type(s) of glue: \_\_\_\_\_

Seam Closure (e.g. sewn, fastened, glued, windowpane): \_\_\_\_\_

### **Step 3: Items Required to Build Seat Cushion Samples**

*Use this page if Aeroblaze will be fabricating your seat cushion test samples.*

#### **Please provide Aeroblaze with the following:**

1. Copies of Purchase Orders, Invoices, or Packing Lists that provide traceability for all materials used in production, including dress covers, batting, muslin, foam, glue, etc.
2. Copies of Step 2 for each different cushion build-up.
3. Pictures of Production Seats (only for 16g seats)
4. For each different cushion buildup:
  - Leather:** 75-80 square feet (typically 1-½ to 2 hides)
  - Fabric (incl. Fireblock):** 40" – 48" Roll Width: 6 Linear Yards  
49" and up Roll Width: 5 Linear Yards
  - Filler, Batting, Muslin:** 2,500 in<sup>2</sup> (when only covering one side of the cushions)
  - Adhesive:** 1 pint
  - Hook & Loop:** 120 inches of each component

#### **Conformity of Test Samples:**

- I authorize Aeroblaze to fabricate test samples and issue FAA Form 8130-9 "Statement of Conformity" as a certifying agent for our organization.

### Step 4: Seat Cushion Test Samples

*Use this page if you are fabricating your own seat cushion test samples and do not need instructions or guidance from Aeroblaze. The build-up of the test samples must be representative of the production build-up(s) from Page 3. Complete one page for each Test Sample buildup.*

**Cushion Type(s) which this test sample represents:** \_\_\_\_\_  
(e.g. Single Passenger Backs and Bottoms, Lav Seat, and Divan Backs)

Material	Manufacturer	Part Number	Lot Number	Traceability / Other Info
Dress Cover				
Batting				
Muslin				
Fireblock Layer				
Foam				
Hook Fastener				
Loop Fastener				

**Fabrication Method:** \_\_\_\_\_  
\_\_\_\_\_

**(Example:** Fireblock layer fully encapsulated and bonded to foam. Dress cover has batting and muslin sewn underneath. Hook fasteners sewn to dress cover.)

**If glue is being used, list the type(s) of glue:** \_\_\_\_\_

**Seam Closure** (e.g. sewn, fastened, glued, windowpane): \_\_\_\_\_

I certify that these test samples represent the “as installed” configuration. These samples use the same materials, manufacturing process, and assembly process as the repair or alteration.

Based on my certification above, I authorize Aeroblaze Laboratory Inc. to complete and sign FAA Form 8130-9 “Statement of Conformity” as a certifying agent for our organization.

## Step 5: Other Non-Cushion Repairs/Alterations

Use this page if you have additional repairs/alterations being performed under this project (e.g. flooring, headliner, armrests, seat shrouds, etc.). Attach as many copies of this page as necessary.

**Test Sample #** \_\_\_\_\_

**Description:** \_\_\_\_\_

**How is this item used in the aircraft?** \_\_\_\_\_  
*(e.g. cabinet panel, dress cover, headliner, floor covering, etc.)*

**Where is this item used in the aircraft?** \_\_\_\_\_  
*(e.g. cabin, crew, lav, cargo)*

**Test Type:**

- Vertical (12-s)   
  Vertical (60-s)   
  Horizontal   
  Heat Release   
  Smoke Density  
 Not Sure (help me decide)   
  Other (specify): \_\_\_\_\_

**Sample Description.** Describe your test sample below. Not all information is required; only fill out what you can. Attach additional sheets as needed.

Layer	Description	Manufacturer	Part Number	Lot Number	New or Simulated Material?
1					<input type="checkbox"/> New <input type="checkbox"/> Simulated
2					<input type="checkbox"/> New <input type="checkbox"/> Simulated
3					<input type="checkbox"/> New <input type="checkbox"/> Simulated
4					<input type="checkbox"/> New <input type="checkbox"/> Simulated
5					<input type="checkbox"/> New <input type="checkbox"/> Simulated
6					<input type="checkbox"/> New <input type="checkbox"/> Simulated
7					<input type="checkbox"/> New <input type="checkbox"/> Simulated
8					<input type="checkbox"/> New <input type="checkbox"/> Simulated
9					<input type="checkbox"/> New <input type="checkbox"/> Simulated
10					<input type="checkbox"/> New <input type="checkbox"/> Simulated

**Other Info** (e.g. bonding material, etc.):  
 \_\_\_\_\_  
 \_\_\_\_\_

**Statement of Conformity**

I certify that these test samples represent the “as installed” configuration. These samples use the same materials, manufacturing process, and assembly process as the repair or alteration.     Agree     Disagree

**FAA Form 8130-9**

Based on my certification above, I authorize Aeroblaze Laboratory Inc. to complete and sign FAA Form 8130-9 “Statement of Conformity” as a certifying agent for our organization     Agree     Disagree