

ACCIDENT NUMBER:

ERA17LA333

REGISTERED OWNER (name and address)	
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IDENTIFICATION NUMBER

N830S

MAKE

Buschmann/Vanzee

DATE OF ACCIDENT

MODEL

Vari Ez

TITLE

Air Safety Investigator

DATE

9/24/17

☒ NO PARTS RETAINED

TITLE

Air Safety Investigator

DATE _____

4/12/18

I HEREBY ACKNOWLEDGE:

- ☒ Receipt of the above described wreckage.
- ☐ Removal of the parts, if any, listed in the evidence control form(s).

TITLE

DATE _____

PHONE NUMBER & EMAIL

REMARKS: