

ZONES: 411
 A/C NUMBER:
 REV. DATE: 06/15/06
 FREQUENCY: 1C

W/C NUMBER: 541M2601
 DATE:
 W/O:
 JAC CODE:



PANELS

411SL
 411TL

REFERENCES

AMM 26-21-01 GMM CHAPTER 4 541M2601

MECH INSP

NOTE: FAA Order 8300.10 allows cylinders to remain in service past the hydrostatic test date. Reference GMM Chapter 4 for details.

CHECK NUMBER #1 ENGINE FIRE EXTINGUISHER BOTTLES

- XXXXX 1. Remove #1 engine main (lower) and alternate (upper) fire extinguisher bottles per AMM 26-21-01.
2. Verify each fire extinguisher bottle weight is within limits, as per AMM 26-21-01. Record weighing results below.

Main (lower) bottle weight: _____ LBS.

Alternate (upper) bottle weight: _____ LBS.

 Engine Fire Extinguisher Bottle Information Table

Part Number	Life Limit
897785	Unlimited
897785-01	Unlimited

Note: Generate a Non-Routine to replace fire extinguisher bottle if weight is 0.10 LBS less than that marked on nameplate. If bottle is replaced, replacement bottle must be weighed prior to installation, and its weight recorded in the space provided above.

- XXXXX 3. Record the required information below for the main (lower) fire extinguisher bottle to be installed on aircraft:

Part Number: _____

Serial Number: _____

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Last Hydrostatic Test Date: _____

Date Of Manufacture: _____

XXXXX _____ 4. Record the required information below for the alternate (upper) fire extinguisher bottle to be installed on aircraft:

Part Number: _____

Serial Number: _____

Last Hydrostatic Test Date: _____

Date Of Manufacture: _____

XXXXX _____ 5. Verify that each cargo fire suppression system bottle has a legible M-21 placard securely affixed to it.

A. "Date of Last Inspection" should reflect the last Hydrostatic test date.

B. "Date of Next Inspection" should reflect the bottle life limit. If bottle does not have a life limit then mark block N/A.

6. Check squib on each #1 engine fire extinguisher bottle for proper part number at location installed, security and legibility of metal identification tag, and time limitation exceedance. Record data and calculate expiration date for each squib in applicable spaces below.

Note: Use the following chart in determining proper squib location and expiration date. Generate a non-routine to correct each discrepancy found.

Part Number	Service Life	Total Life
OA876299	8 years	8 years
876299-02 (LAC 672025-115)	5 years	6 years
876299-3 (LAC 672025-119)	10 years	10 years
AE876299	8 years	10 years

Note: Service life begins when the squib is installed on an extinguisher. Full service life may be

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utilized only if total life is not exceeded.

Note: If squib part number installed on bottle is not listed above, or if P/N squib is incorrect for location installed, generate a non-routine to remove and replace the squib per AMM procedures. Record the information from the replacement squib below and ensure tag P/N: 149-101ATA is properly filled out and attached to the squib.

XXXXX _____ A. Main (lower) fire extinguisher bottle squib.

- (1) Record the following information from the main (lower) fire extinguisher container squib tag:

Part Number _____

Serial Number _____

Date Of Manufacture _____

Installation Date _____

Note: If installation date is not listed on metal squib information tag, installation date will be the same as manufacture date. If the tag is missing, or illegible, generate a non-routine to have a new tag made and attached IAW E.O.#L10-26ID-2470.

Note: Some squibs do not contain serial numbers. N/A serial number blank if serial number is not available.

- (2) Work the two formulas listed below to determine the squib expiration date. Expiration date is the earlier of the two dates calculated. Record expiration date below.

_____ + _____ = _____
Date Of Manufacturer Total Life Date

_____ + _____ = _____
Installation Date Service Life Date

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Expiration Date _____

- (3) If current date is 15 months or less from expiration date, generate a Non-Routine for squib removal and replacement. Record the following information for the replacement squib and ensure information is properly etched on ID tag:

Part Number _____

Serial Number _____

Date Of Manufacturer _____

Installation Date _____

Note: N/A information blanks in Step 6. A. (3) if squib replacement is not required.

XXXXX _____

- B. Alternate (upper) fire extinguisher bottle squib.

- (1) Record the following information from the alternate (upper) fire extinguisher container squib tag:

Part Number _____

Serial Number _____

Date Of Manufacturer _____

Installation Date _____

Note: If installation date is not listed on metal squib information tag, installation date will be the same as manufacture date. If the tag is missing, or illegible, generate a non-routine to have a new tag made and attached IAW E.O.#L10-26ID-2470.

Note: Some squibs do not contain serial numbers. N/A serial number blank if serial number is not available.

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- (2) Work the two formulas listed below to determine the squib expiration date. Expiration date is the earlier of the two dates calculated. Record expiration date below.

$$\frac{\text{Date Of Manufacturer}}{\text{Date Of Manufacturer}} + \frac{\text{Total Life}}{\text{Total Life}} = \frac{\text{Date}}{\text{Date}}$$

$$\frac{\text{Installation Date}}{\text{Installation Date}} + \frac{\text{Service Life}}{\text{Service Life}} = \frac{\text{Date}}{\text{Date}}$$

Expiration Date _____

- (3) If current date is 15 months or less from expiration date, generate a Non-Routine for squib removal and replacement. Record the following information for the replacement squib and ensure information is properly etched on ID tag:

Part Number _____

Serial Number _____

Date Of Manufacturer _____

Installation Date _____

Note: N/A information blanks in Step 6. B. (3) if squib replacement is not required.

XXXXX _____ 7. Verify that all applicable valving, safety relief devices, mounting brackets, tubing, and associated instrumentation in the fire extinguisher bottle area are secure and acceptable for continued safe service.

_____ 8. Reinstall the #1 engine main (lower) and alternate (upper) fire extinguisher bottles per AMM 26-21-01.

*****END OF WORKCARD*****