Pre-Flight Checklist

Date: [Insert Date]

To: [Insert Recipient Name]

From: [Insert Your Name/Position]

Subject: Fuel Loading Confirmation

Checklist Items

- 1. Aircraft Registration: [Insert Registration Number]
- 2. Flight Number: [Insert Flight Number]
- 3. Fuel Type: [Insert Fuel Type]
- 4. Fuel Quantity: [Insert Fuel Quantity] (in liters/gallons)
- 5. Fuel Loading Start Time: [Insert Start Time]
- 6. Fuel Loading Completion Time: [Insert Completion Time]
- 7. Pre-flight Inspection Completed: [Yes/No]
- 8. Fuel Quality Check: [Yes/No]
- 9. Pilot Confirmation: [Pilot Name and Signature]

Please confirm the above details at your earliest convenience.

Thank you.

Sincerely,

[Your Name]
[Your Position]

[Your Contact Information]