

CP AVIATION, INC. NAVIGATION LOG

CHECKPOINTS	CH Compass Heading	TAS	ALT	VOR		WIND		TC	TH	MH	CH	DIST	GS	TIME	FUEL	ACTUAL	
				Freq	Bearing	True Course	True Heading	Magnetic Heading	Compass Heading	OFF	Used			FUEL			
Departing Airport	Ident	To/ From	Direction	Velocity	WCA -L +R	Variation -E+W	Deviation +/-	Leg	Est	ETE	Used	Rem	Act	ATE	Rem	Used	
Temp °C				Rem													Act
			Climb														
Destination Airport	Elevation:																
	Traffic Pattern Alt:													TIME LANDED:			
AIRPORT DIAGRAM			ATIS	NOTES:													
			Wind														
			Altimeter														
			Runway														
												DEPARTURE		ARRIVAL			
												ATIS		ATIS			
												CLEARANCE		CLEARANCE			
												GROUND		GROUND			
												TOWER		TOWER			
												DEPARTURE		DEPARTURE			
												CENTER		CENTER			
												FSS		FSS			
												CTAF		CTAF			

CROSS COUNTRY WEATHER INFORMATION AND TAKE-OFF & LANDING DATA WORKSHEETS

Weather Information		Take-Off & Landing Data		
Source of FAA Approved Weather Briefing:		Take off Airport:		Landing Airport:
(ForeFlight/1-800-WX-BRIEF)		Airport Elevation	MSL	MSL
SIGMETs, AIRMETS, NOTAMS related to flight? Please explain, if applicable:		Pattern Altitude	MSL	MSL
			AGL	AGL
		Weight LBS		
		Altimeter Setting		
		Pressure Altitude		
		Temperature		
		Density Altitude		
		Ground Roll		
		Total to Clear 50ft Obstacle		
Refer to Section 5 of POH/AFM for take-off & landing data.				
** Be sure to include each take off and landing. **				
Top of Climb:	Top of Descent:	Fuel:		
Time	Cruise Alt	Total Useable:		
Fuel	Alt to Lose	Start, Taxi, Takeoff:		
Distance	Rate of Descent	Enroute:		
		Reserve:		
	Time	Total Required:		
(Attach ICAO International Flight Plan)				

WEIGHT & BALANCE WORKSHEET



Aircraft N#: _____

Pilot Name: _____

Max Gross Weight: _____

CFI Name: _____

	Weight	Arm	Moment
Basic Empty Weight:			
Front Passengers:			
Rear Passengers:			
Front Baggage:			
Rear Baggage:			
Total Usable: 6 lb. per gal.			

Total Weight:	
Total Moment:	

Total Moment/Total Weight = _____ CG Limit

Fwd CG Limit: _____ Aft CG Limit _____

Useful Load: _____

INTERNATIONAL FLIGHT PLAN

Approved OMB No. 2120-0026
Exp. 7/31/2020

International Flight Plan	
PRIORITY <=FF	ADDRESSEE(S) _____ _____
FILING TIME _____	ORIGINATOR _____
SPECIFIC IDENTIFICATION OF ADDRESSEE(S) AND / OR ORIGINATOR _____	
3 MESSAGE TYPE <=(FPL	7 AIRCRAFT IDENTIFICATION _____
9 NUMBER _____	10 EQUIPMENT _____
13 DEPARTURE AERODROME _____	TIME _____
15 CRUISING SPEED _____	LEVEL _____
ROUTE _____	
<=	
16 DESTINATION AERODROME _____	
TOTAL EET HR MIN _____	ALTN AERODROME _____
2ND ALTN AERODROME _____	
18 OTHER INFORMATION _____	
<=	
SUPPLEMENTARY INFORMATION (NOT TO BE TRANSMITTED IN FPL MESSAGES)	
19 ENDURANCE HR MIN E/ _____	PERSONS ON BOARD P/ _____
SURVIVAL EQUIPMENT POLAR / DESERT / MARITIME / JUNGLE <input type="checkbox"/> / <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	JACKETS LIGHT / FLUORES / UHF / VHF <input type="checkbox"/> / <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
DINGHIES NUMBER CAPACITY COVER D/ _____ C/ _____	COLOR _____
AIRCRAFT COLOR AND MARKINGS A/ _____	
REMARKS N/ _____	
PILOT-IN-COMMAND C/ _____	
FILED BY _____	ACCEPTED BY _____
ADDITIONAL INFORMATION _____	

FAA Form 7233-4 (7/15)

Approved OMB No. 2120-0026
Exp. 7/31/2020

International Flight Plan	
PRIORITY <=FF	ADDRESSEE(S) _____ _____
FILING TIME _____	ORIGINATOR _____
SPECIFIC IDENTIFICATION OF ADDRESSEE(S) AND / OR ORIGINATOR _____	
3 MESSAGE TYPE <=(FPL	7 AIRCRAFT IDENTIFICATION _____
9 NUMBER _____	10 EQUIPMENT _____
13 DEPARTURE AERODROME _____	TIME _____
15 CRUISING SPEED _____	LEVEL _____
ROUTE _____	
<=	
16 DESTINATION AERODROME _____	
TOTAL EET HR MIN _____	ALTN AERODROME _____
2ND ALTN AERODROME _____	
18 OTHER INFORMATION _____	
<=	
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SURVIVAL EQUIPMENT POLAR / DESERT / MARITIME / JUNGLE <input type="checkbox"/> / <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	JACKETS LIGHT / FLUORES / UHF / VHF <input type="checkbox"/> / <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
DINGHIES NUMBER CAPACITY COVER D/ _____ C/ _____	COLOR _____
AIRCRAFT COLOR AND MARKINGS A/ _____	
REMARKS N/ _____	
PILOT-IN-COMMAND C/ _____	
FILED BY _____	ACCEPTED BY _____
ADDITIONAL INFORMATION _____	

FAA Form 7233-4 (7/15)

For guidance on how to fill out the form, search the link below:
https://www.faa.gov/air_traffic/publications/atpubs/fs_html/appendix_a.html

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