

TO 00-25-241

TECHNICAL MANUAL

PARACHUTE LOGS AND RECORDS

F41608-87-D-A288

(ATOS)

BASIC AND ALL CHANGES HAVE BEEN MERGED TO MAKE THIS A COMPLETE PUBLICATION

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1. PURPOSE.

The purpose of this technical order is to explain how to prepare, replace and dispose of AFTO Form 391, "Parachute Log," and AFTO Form 392, "Parachute Repack, Inspection and Component Record" which are used to log and record parachute information.

2. GENERAL.

a. AFTO Form 391 is the form currently prescribed for recording/maintaining data applicable to all types parachutes and to components utilized with the various parachute assemblies.

b. All data pertaining to organization, unit of assignment, or activity entered on the AFTO/DD Forms or stenciled on life support/survival equipment may be omitted at the option of the major command.

c. If the parachute log is used for cargo, deceleration, drogue chute, torso harness, etc., it is appropriate to reidentify the necessary pages or titles.

d. For parachutes employing reefing line devices, enter information concerning such devices in the time delay cartridge section and reidentify the section pages accordingly.

e. For drogue parachutes employing Time Change Items (TCI), enter information on the canopy and harness data page and retitle page accordingly.

f. On removal/replacement of any parachute component or accessory the person accomplishing the removal/replacement action will enter on the next open line of the appropriate page the new/updated information.

| PARACHUTE LOG | |
|--|----------------------|
| INSTRUCTIONS: This form will be initiated for each parachute when the parachute is first processed for maintenance inspection, technical instruction compliance, or packing. It will be carried in the pocket provided for this purpose, and will be maintained in accordance with existing regulations. Entries will be be clear and neat. This form will be kept clean. | |
| STYLE | SERIAL NUMBER |
| PART NUMBER | STOCK NUMBER |
| NAME AND ORGN OF ASSEMBLER | |
| ORGANIZATION ASSIGNED | LOCAL CONTROL NUMBER |

AFTO FORM **391**
MAY 82

PREVIOUS EDITION WILL BE USED

Figure 1. AFTO Form 391 General Information (Cover)

g. To update the AFTO Form 391 draw a single line through the old information and enter the new information on the next open line.

h. All entries in AFTO Form 391 shall be of a permanent nature, nonfading characters and all entries shall be legible.

i. All entries made on AFTO Form 392 shall be made in pencil and shall be legible.

3. AFTO Form 391 (Figure 1-18).

This form is used as a maintenance, repair, technical compliance, inspection, and general historical record of each parachute. It is initiated when the parachute is first processed for maintenance, inspection, technical order compliance, or packing, and is continued during the life of the parachute.

NOTE

All signature blocks will consist of first name initial and signed last name. For periods when these operations are conducted, see 13C series, 14D1 (-2 and -3 series), 14D2 series and 14D3 series technical orders.

a. Preparing AFTO Form 391. Make the following entries:

(1) General. (Figure 1).

(a) Style: Style and type of parachute, "Back Automatic-SEAT, Automatic-ETC."

(b) Part Number: Part number of Parachute Assembly.

(c) Name and Organization of Assembler: First Name Initial, Last Name and the Location/Unit of Assembler.

(d) Organization Assigned: Name of base and organization to which the parachute is currently assigned for operational use. (If dictated by operational requirements, major commanders may authorize deletion of this information.)

(e) Serial Number of Canopy.

(f) Stock Number: Stock Number of complete Parachute/Recovery Assembly.

(g) Local Control Number: Number assigned by possessing operational organization to facilitate identification and control of parachute assembly.

NOTE

Data Pertaining to organization, unit of assignment, or activity entered on AFTO/DD Forms or stenciled on life support/survival equipment which could divulge the base, activity, or unit to which the item is assigned, may be omitted, at the option of the major command.

| CONTENTS | | | |
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| SECTION | PAGE | SECTION | PAGE |
| INSPECTION | 1-12 | LOCATOR BEACON | 27-28 |
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Figure 2. AFTO Form 391 Contents

(2) Inspection Section. Used during 10, 14, and 30 Day Inspections.

(a) Date: Date inspection accomplished.

(b) Activity: Unit performing inspection and printed name of person who performed the work (i.e., 80th FW, John Doe).

(c) Signature: Signature of person who performed the work.

(3) Complete Inspection and Repack. (Figure 4)

| INSPECTION | | |
|------------|----------|-----------|
| DATE | ACTIVITY | SIGNATURE |
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Figure 3. AFTO Form 391

(a) Date: Date of complete inspection and repack, or inspection for storage.

(b) Activity: Unit performing inspection and printed name of person who performed the work (i.e., 80th FW, John Doe).

(c) Signature: Signature of person who did the work.

(4) Technical Order Compliance Record. (Figure 5)

(a) Date/Technical Order Number: Date and Technical Order Number.

(b) Title: Enter the word Basic, and/or Title of current TCTO's.

(c) Quality Control Inspection: Initials of person who Quality Controlled work accomplished.

| COMPLETE INSPECTION AND REPACK | | |
|--------------------------------|----------|-----------|
| DATE | ACTIVITY | SIGNATURE |
| | | |
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Figure 4. AFTO Form 391

| TECHNICAL ORDER COMPLIANCE RECORD | | | | |
|-----------------------------------|-------|----|---------------|----------------|
| T.O. NUMBER | TITLE | QC | ACTI- VITY | SIGNATURE/DATE |
| | | | | |
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Figure 5. AFTO Form 391

(d) Activity: Activity who performed the work.

NOTE

Data Pertaining to organization, unit of assignment, or activity entered on AFTO/DD Forms or stenciled on life support/survival equipment which could divulge the base, activity, or unit to which the item is assigned, may be omitted, at the option of the major command.

(e) Signature: Signature and Date complied with.

NOTE

Enter dates of applicable basic, current change no., time compliance technical supplements, and messages in the T.O. number block.

(5) Canopy Data. (Figure 6)

(a) Manufacture Date: The date, (month and year) canopy was manufactured.

(b) Install Date: The I date stenciled on the canopy.

(c) Manufacturer: Name of canopy manufacture, or manufacturer's code when name is not known.

(d) Contract Number: Contract number stenciled on canopy information panel.

(e) Expiration Date: The date (month and year) canopy will be removed from service computed from installation (I date) or date of manufacture as prescribed by the technical order governing the specific canopy.

| CANOPY DATA | | | | |
|-------------|------------|--------------|-----------------|----------|
| MFR DATE | INSTL DATE | MANUFACTURER | CONTRACT NUMBER | EXP DATE |
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Figure 6. AFTO Form 391

(6) Harness Data. (Figure 7)

- (a) Manufacture Date: The date (month and year) harness was manufactured.
- (b) Install Date: The I date stenciled on the harness.
- (c) Manufacturer: Name of harness manufacturer, or manufacturers code when name is not known.

- (d) Expiration Date: The date (month and year) harness will be removed from service as computed from installation (I date) or manufacturing date as prescribed by technical order governing the specific harness.

| HARNES DATA | | | |
|-------------|--------------|--------------|----------|
| MFR DATE | INSTALL DATE | MANUFACTURER | EXP DATE |
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Figure 7. AFTO Form 391

(7) Riser Data. (Figure 8)

- (a) Manufacture Date: The date (month and year) Riser was manufactured.
- (b) Install Date: The I date stenciled on the riser.
- (c) Manufacturer: Name of riser manufacturer.

- (d) Expiration Date: The date (month and year) riser will be removed from service computed from installation (I date) or manufacturing date as prescribed by technical order governing the specific riser.
- (e) Remarks: Indicate if left or right riser or both.

| RISER DATA | | | | |
|------------|------------|--------------|----------|---------|
| MFR DATE | INSTL DATE | MANUFACTURER | EXP DATE | REMARKS |
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Figure 8. AFTO Form 391

(8) Automatic Ripcord Actuator/Release. (Figure 9)

(a) Inspection Date: Date release actuator was inspected

(b) Type: Type/manufacturer-actuator/release installed such as F-1B, Scot, Mod 11,000, etc.

(c) In Activity Column: Put Actuator Serial Number or Mechanical Serial Number. Mark top of column with either Actuator or Mechanical.

(d) Time/Delay Setting: Exact time increment in seconds, timer mechanism or cartridge delay is set.

(e) Altitude Setting: Exact altitude increment at which aneroid (altitude) mechanism was set, or release fired at.

NOTE

Each time the settings (time/altitude) are changed, a separate entry reflecting latest settings will be made. F-1B release will always be set at 14,000 feet so enter either function check or operation check. If function is performed enter number of check; i.e., function check #30 in the altitude portion of this page.

(f) Signature: Signature of person who preformed the inspection.

| AUTOMATIC RIPCORD ACTUATOR/RELEASE | | | | | |
|------------------------------------|------|----------|---------|----------|-----------|
| INSTL DATE | TYPE | ACTIVITY | SETTING | | SIGNATURE |
| | | | TIME | ALTITUDE | |
| | | | | | |
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NOTE: CHANGE INSTL DATE TO INSPECT DATE, CHANGE ACTIVITY TO LOT NR, VARIATIONS MAY EXISTS.

Figure 9. AFTO Form 391

(9) Time Delay Cartridge. (Figure 10)

- (a) Cartridge Lot Number: Cartridge lot number.
- (b) Manufacture Date: Date cartridge was manufactured.
- (c) Time Delay: Time delay of cartridge.

NOTE

Enter booster for Scott release.

- (d) Install Date: Date cartridge installed.
- (e) Expiration Date: Date on which normal service life of cartridge will expire, based on current data in applicable technical orders.
- (f) Actuator S/N: S/N from Actuator Installed.

| TIME DELAY CARTRIDGE | | | | | |
|----------------------|----------|------------|-------------|----------|---------------------|
| CARTRIDGE LOT NO. | MFR DATE | TIME DELAY | INSTL. DATE | EXP DATE | ACTUATOR SERIAL NO. |
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Figure 10. AFTO Form 391

(10) Personnel Locator Beacon. (Figure 11)

- (a) Install Date: Date beacon was installed.
- (b) Type: Beacon type.
- (c) Serial Number: Serial number of the beacon.

(d) Expiration Date: Date normal service life of battery installed in beacon will expire, based on current data in applicable technical orders.

(e) Signature: Signature of person who installed the beacon.

| PERSONNEL LOCATOR BEACON | | | | |
|--------------------------|------|-----------|----------|-----------|
| INSTL DATE | TYPE | SERIAL NO | EXP DATE | SIGNATURE |
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Figure 11. AFTO Form 391

(11) Distress Maker Light. (Figure 12)

- (a) Install Date: Date the light was installed.
- (b) Type: Type light.
- (c) Serial Number: Serial number of installed light.

(d) Battery Expiration Date: Date normal service life of battery installed in the light will expire, based on current data in applicable technical orders.

(e) Signature: Signature of the person who installed the light.

| DISTRESS MARKER LIGHT | | | | |
|-----------------------|------|-----------|----------|-----------|
| INSTL DATE | TYPE | SERIAL NO | EXP DATE | SIGNATURE |
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Figure 12. AFTO Form 391

(12) Survival Kit/Oxygen Cylinder/Personnel Lowering Device. (Figure 13)

(a) Item: Enter descriptive name of items installed such as Survival Kit, AFP (Air Force Pamphlet), Knife, Oxy Cyl, Flares, etc.

(b) Type: Type number of item installed, such as SRU-16P, AFP 64-15, Hook Blade, MD-1, Flares (MBA5-9).

(c) Install Date: Date item was installed. For AFP 64-15 use publication date.

(d) Activity: Name of activity which installed the item.

(e) Signature: Signature of person who installed the item.

NOTE

Always use latest procured item or publication date when installing miscellaneous survival items.

| SURVIVAL KIT/OXYGEN CYLINDER/PERSONNEL LOWERING DEVICE | | | | |
|--|------|------------|----------|-----------|
| ITEM | TYPE | INSTL DATE | ACTIVITY | SIGNATURE |
| | | | | |
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Figure 13. Survival Kit/Oxygen Cylinder/Personnel Lowering Device

(13) Drogue Gun Data. (Figure 14)

(a) Install Date: Date drogue gun was installed.

(b) Activity: Name of activity which installed the drogue gun.

(c) Lot Number: Lot number of cartridge installed in drogue gun.

(d) Manufacture Date: Date cartridge was manufactured.

(e) Signature: Signature of person who installed drogue gun.

| DROGUE GUN DATA | | | | |
|-----------------|----------|------------|----------|-----------|
| INSTL DATE | ACTIVITY | LOT NUMBER | MFR DATE | SIGNATURE |
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Figure 14. AFTO Form 391

(14) Canopy Spreader Gun Data. (Figure 15)

- (a) Install Date: Date spreader gun was installed.
- (b) Activity: Activity which installed spreader gun.

(c) Lot Number: Lot number of cartridge installed in spreader gun.

- (d) Manufacture Date: Date cartridge was manufactured.
- (e) Signature: Signature of person who installed spreader gun.

| CANOPY SPREADER GUN DATA | | | | |
|--------------------------|----------|------------|----------|-----------|
| IN STL DATE | ACTIVITY | LOT NUMBER | MFR DATE | SIGNATURE |
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Figure 15. AFTO Form 391

(15) Major Repair/Modification. (Figure 16)

- (a) Date: Date repair or modification was performed.
- (b) Activity: Base at which repair or modification was performed.
- (c) Signature: Signature of person who performed repair or modification.

(d) Remarks: Describe major repair or modification performed. Sectional change, pack flap removed and replaced-modified canopy-sub back strap, etc.

| MAJOR REPAIR / MODIFICATION | | | |
|-----------------------------|----------|-----------|---------|
| DATE | ACTIVITY | SIGNATURE | REMARKS |
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Figure 16. AFTO Form 391

- (16) Survival Kit Actuator. (Figure 17)
- (a) Install Date: Date survival kit actuator was installed.
- (b) Activity: Name of activity which installed survival kit actuator.

(c) Signature: Signature of person who installed survival kit actuator.

| SURVIVAL KIT ACTUATOR | | |
|-----------------------|----------|-----------|
| INSTL DATE | ACTIVITY | SIGNATURE |
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Figure 17. AFTO Form 391

- (17) Spare Pages. Use a page for each of the following:
- (a) EPA/UWARS, DOM, DOI, DOE, LOT NR, S/N and Signature.

- (b) Battery (if applicable), DOM, DOI, DOE and Signature.
- (c) Cartridge DOM, DOI, DOE and Signature.
- Use spare pages as needed.

| SPARE PAGES | |
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Figure 18. AFTO Form 391 (Spare Pages)

(18) Replacing AFTO Form 391.

(a) Replace AFTO Form 391 when it becomes mutilated, excessively soiled, or all pages are filled. When preparing a replacement form, transcribe relative and current information to the new form. Basic T.O. and all active TCTOs, plus original installation dates where required.

(b) Replace lost forms immediately. Accomplished by 2A7X4 personnel.

(c) Disposition of AFTO Form 391. Destroy the form after final disposition of the parachute assembly in accordance with AFM 37-139, Records Disposition Schedule, Table 21-6.

4. AFTO Form 392 (Figure 19 and 20).

This form is used to record past inspections, inspections due dates, components/accessories data and initial entry of applicable basic T.O. and TCTO. It is initiated when the parachute or harness is placed in service and is maintained throughout the service life.

NOTE

To update the AFTO Form 392 entries, to include latest parachute component, draw a single line through or delete printed component entry and enter component needed. All component entries will be in ink. All other entries will be in pencil and shall be legible. Computer software may be used in lieu of AFTO Form 392. All information in paragraph 4 will be recorded.

a. Preparing AFTO Form 392. Transcribe the following entries from AFTO Form 391.

(1) General. (Figure 19)

(a) Local Control Number: Number assigned by operational organization to facilitate identification control of parachute or harness assembly.

(b) Type: Style/type of parachute.

(c) Manufacture: Name of canopy manufacturer.

(2) Repack Inspection Record. (Figure 19)

(a) Repack Record: Date last repack was accomplished and last name printed of individual who performed the inspection. In the appropriate column below enter the date the next repack is due.

(b) Inspection Record: Date last inspection was accomplished and last name (signature) of

the individual who performed the inspection. In the appropriate column below, enter the next date the inspection is due.

(3) Component Data. (Figure 20)

(a) Serial Number: Of Component or accessory when required existent.

(b) Date of manufacture: Date of manufacture of component or accessory.

(c) Date installed: Date of component or accessory installation.

(d) Date Expires: Expiration date of component or accessory.

(e) Cartridge Lot Number: Lot number of automatic actuator cartridge, cartridge, drogue gun or spreader gun.

(f) Tech Order Compliance: Enter the basic T.O. number and all active TCTOs affecting the complete assembly and each component or accessory.

b. Locally designated personnel will maintain the AFTO Form 392 file so current status of each "In Service" parachute or torso harness can be readily determined. A master file, centrally located where forms are maintained by inspection due date, is recommended. However, any locally developed system approved by the Major Command will be acceptable.

c. Personnel maintaining the AFTO Form 392 will check entries for completeness and accuracy and update it after each parachute repack transcribing information contained in AFTO Form 391. Each time a component or accessory is removed and replaced, the data on AFTO Form 392 will be changed to reflect the current information. AFTO Form 392 on personnel chutes/torso harnesses will be checked for completeness and accuracy during each routine inspection.

NOTE

Additional space is provided on the back side of form for entry of optional items and for recording data pertaining to optionally installed equipment as directed by major Air Commands.

d. Replacement of mutilated or excessively soiled forms will be accomplished by transcribing all current information to a new form with the exception of the inspections record where only data from the last completed repack and inspection record need be transcribed. Enter the next inspection due dates.

| PARACHUTE REPACK INSPECTION AND COMPONENT RECORD | | | | | | | | | | | | | | |
|--|---------------|------|-------------------|--------|-------------------|----------|-------------------|-----------|-------------------|--------|-------------------|----------|--------|-----------|
| TYPE | MFR | | | | STOCK NO. | | | | SERIAL NO. | | | | | |
| | REPACK RECORD | | INSPECTION RECORD | | INSPECTION RECORD | | INSPECTION RECORD | | INSPECTION RECORD | | INSPECTION RECORD | | | |
| DATE DUE | ACCOMP | NAME | DATE DUE | ACCOMP | SIGNATURE | DATE DUE | ACCOMP | SIGNATURE | DATE DUE | ACCOMP | SIGNATURE | DATE DUE | ACCOMP | SIGNATURE |
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AFTO FORM 392 SEP 79 PREVIOUS EDITION WILL BE USED

Figure 19. AFTO Form 392 (Front)

| COMPONENT | SERIAL NO | DATE OF MFR | DATE INSTALLED | DATE EXPIRES | CARTRIDGE LOT NUMBER | TECH ORDER COMPLIANCE |
|----------------------|-----------|-------------|----------------|--------------|----------------------|-----------------------|
| CANOPY | | | | | | |
| HARNES | | | | | | |
| | | | | | | |
| RISER | | | | | | |
| | | | | | | |
| AUTOMATIC ACTUATOR | | | | | | |
| LOCATOR BEACON | | | | | | |
| BEACON BATTERY | | | | | | |
| OXYGEN CYLINDER | | | | | | |
| SURVIVAL KIT | | | | | | |
| MARKER LIGHT | | | | | | |
| MARKER BATTERY | | | | | | |
| LOWERING DEVICE | | | | | | |
| DROGUE GUN | | | | | | |
| SPREADER GUN | | | | | | |
| CARTRIDGE TIME DELAY | | | | | | |

Figure 20. AFTO Form 392 (Back)