



T-HANGAR SQUAWK SHEET

Date/Time: _____

Please complete all sections where applicable.

Contact Information:

Tenant Name: _____ Phone (Day): _____

E-mail Address: _____ Phone(Evening): _____

Description of Squawk (Lights/electrical/door issues/others...)

Action Taken: (To be filled out by Airport Representative)

Signature of approval for repairs: _____ Date: _____