

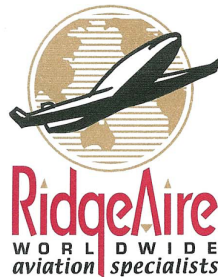
# N8442H

## 1981 Piper PA-32-301

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# FAA Form 337s

**MSN: 32-8106098**



*Prepared by the worldwide aviation specialists at RidgeAire, Inc.*



U.S. Department  
of Transportation  
Federal Aviation  
Administration

## MAJOR REPAIR AND ALTERATION (Airframe, Powerplant, Propeller, or Appliance)

Form Approved  
OMB No. 2120-0020  
2/28/2011

Electronic Tracking Number

For FAA Use Only

**INSTRUCTIONS:** Print or type all entries. See Title CFR §43.9, Part 43 Appendix B, and AC 43.9-1 (or subsequent revision thereof) for instructions and disposition of this form. This report is required by law (49 U.S.C. §44701). Failure to report can result in a civil penalty for each such violation (49 U.S.C. §46301(a)).

<b>1. Aircraft</b>	Nationality and Registration Mark <u>N844ZH</u>	Serial No. <u>32-8106098</u>	
	Make <u>PA 32-301 Piper</u>	Model <u>PA32-301</u>	Series
<b>2. Owner</b>	Name (As shown on registration certificate) <u>Air Mart, Inc</u>	Address (As shown on registration certificate) <u>4144 AVIATOR RD Ste 150</u>	
		City <u>Lexington</u>	State <u>KY</u>
		Zip <u>40510</u>	Country <u>USA</u>

### 3. For FAA Use Only

4. Type		5. Unit Identification			
Repair	Alteration	Unit	Make	Model	Serial No.
<input type="checkbox"/>	<input checked="" type="checkbox"/>	AIRFRAME	_____	(As described in item 1 above)	<u>32-8106098</u>
<input type="checkbox"/>	<input type="checkbox"/>	POWERPLANT			
<input type="checkbox"/>	<input type="checkbox"/>	PROPELLER			
<input type="checkbox"/>	<input type="checkbox"/>	APPLIANCE	Type		
			Manufacturer		

### 6. Conformity Statement

<b>A. Agency's Name and Address</b>		<b>B. Kind of Agency</b>	
Name <u>Thomas A. Ferguson Air Mart</u>	Address <u>4144 Aviator Rd Ste 150</u> City <u>Lexington</u> State <u>KY</u> Zip <u>40510</u> Country <u>USA</u>	<input checked="" type="checkbox"/> U.S. Certificated Mechanic	Manufacturer
		<input type="checkbox"/> Foreign Certificated Mechanic	C. Certificate No.
		<input type="checkbox"/> Certificated Repair Station	<u>3020594</u>
		<input type="checkbox"/> Certificated Maintenance Organization	

D. I certify that the repair and/or alteration made to the unit(s) identified in item 5 above and described on the reverse or attachments hereto have been made in accordance with the requirements of Part 43 of the U.S. Federal Aviation Regulations and that the information furnished herein is true and correct to the best of my knowledge.

Extended range fuel per 14 CFR Part 43 App. B  Signature/Date of Authorized Individual  
4-1-2019

### 7. Approval for Return To Service

Pursuant to the authority given persons specified below, the unit identified in item 5 was inspected in the manner prescribed by the Administrator of the Federal Aviation Administration and is  APPROVED  REJECTED

BY	FAA Fit. Standards Inspector	Manufacturer	Maintenance Organization	Person Approved by Canadian Department of Transport
	FAA Designee	Repair Station	Inspection Authorization	Other (Specify)

Certificate or Designation No. 3020594 IA Signature/Date of Authorized Individual  
4-1-2019 Thomas A. Ferguson

### NOTICE

Weight and balance or operating limitation changes shall be entered in the appropriate aircraft record. An alteration must be compatible with all previous alterations to assure continued conformity with the applicable airworthiness requirements.

#### 8. Description of Work Accomplished

(If more space is required, attach additional sheets. Identify with aircraft nationality and registration mark and date work completed.)

N 8442 H	4-1-2019
Nationality and Registration Mark	Date

#### Aircraft Total Time

Installed the Door Steward door assist gas spring modification in accordance with STC# SA01120SE, instructions MVA-B40C10M&O, on cabin and/or baggage door(s). Weight change negligible. Item added to the aircraft equipment list.

#### INSTRUCTIONS FOR CONTINUED AIRWORTHINESS

The are NO MANDATORY replacement items, structural inspection intervals or related structural inspection procedures.

#### ATA Chapter 05      Time Limits/Maintenance Checks

05-00      General

The *Door Steward*™ installation should be inspected during scheduled airframe periodic inspections that cover the door and door frame areas.

05-20      Scheduled Maintenance

Inspection of the installation will consist of the following:

1. Security of attachment of both airframe and door brackets to the associated structure.
2. Security of the gas spring attachment to their associated brackets.
3. Security of the rod end to the airframe bracket and ball stud to the door bracket.
4. Smooth operation of the gas spring. Inspect for evidence of end seal leakage or loss of gas spring pressure.

Additional Sheets Are Attached



US Department of Transportation  
Federal Aviation Administration

**MAJOR REPAIR AND ALTERATION**  
**(Airframe, Powerplant, Propeller, or Appliance)**

OMB No. 2120-0020  
Exp: 5/31/2018

Electronic Tracking Number

For FAA Use Only

INSTRUCTIONS: Print or type all entries. See Title 14 CFR §43.9, Part 43 Appendix B, and AC 43.9-1 (or subsequent revision thereof) for instructions and disposition of this form. This report is required by law (49 U.S.C. §44701). Failure to report can result in a civil penalty for each such violation. (49 U.S.C. §46301(a))

1. Aircraft	Nationality and Registration Mark N8442H	Serial No. 32-8106098
	Make <b>PIPER</b>	Model <b>PA32-301</b> Series <b>31</b>
2. Owner	Name (As shown on registration certificate) <b>CHAVERS CONSTRUCTION INC</b>	Address (As shown on registration certificate) Address 1795 DETROIT BLVD
		City <b>PENSACOLA</b> State <b>FL</b> Zip <b>32534</b> Country <b>USA</b>

**3. For FAA Use Only**

4. Type		5. Unit Identification			
Repair	Alteration	Unit	Make	Model	Serial No.
<input type="checkbox"/>	<input checked="" type="checkbox"/>	AIRFRAME	<u>PIPER</u>	(As described in Item 1 above)	<u>32-8106098</u>
<input type="checkbox"/>	<input type="checkbox"/>	POWERPLANT			
<input type="checkbox"/>	<input type="checkbox"/>	PROPELLER			
<input type="checkbox"/>	<input type="checkbox"/>	APPLIANCE	Type		
			Manufacturer		

**6. Conformity Statement**

A. Agency's Name and Address		B. Kind of Agency		C. Certificate No.
Name	RICHARD CHAMPUT	<input checked="" type="checkbox"/>	U. S. Certificated Mechanic	<b>3321294</b>
Address	4731 SUMMIT DR.	<input type="checkbox"/>	Foreign Certificated Mechanic	
City	MILL BROOK      State AL	<input type="checkbox"/>	Certificated Repair Station	
Zip	36054      Country USA	<input type="checkbox"/>	Certificated Maintenance Organization	

D. I certify that the repair and/or alteration made to the unit(s) identified in item 5 above and described on the reverse or attachments hereto have been made in accordance with the requirements of Part 43 of the U.S. Federal Aviation Regulations and that the information furnished herein is true and correct to the best of my knowledge.

Extended range fuel per 14 CFR Part 43 App. B <input type="checkbox"/>	Signature/Date of Authorized Individual <i>Richard Champ</i> 09-13-2016
--	--

**7. Approval for Return to Service**

Pursuant to the authority given persons specified below, the unit identified in item 5 was inspected in the manner prescribed by the Administrator of the Federal Aviation Administration and is  Approved  Rejected

BY	FAA Fit. Standards Inspector	Manufacturer	Maintenance Organization	Persons Approved by Canadian Department of Transport
	FAA Designee	Repair Station	<input checked="" type="checkbox"/> Inspection Authorization	

Certificate or Designation No. 3440120	Signature/Date of Authorized Individual <i>Donald T. Davis</i> 9/13/2016
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NOTICE

Weight and balance or operating limitation changes shall be entered in the appropriate aircraft record. An alteration must be compatible with all previous alterations to assure continued conformity with the applicable airworthiness requirements.

8. Description of Work Accomplished

(If more space is required, attach additional sheets. Identify with aircraft nationality and registration mark and date work completed.)

N8442H

9/10/2016

Nationality and Registration Mark

Date

Installed Flap Hinge Fairing STC # SA1195GL Kit In accordance with Knots 2u Ltd., Installation and Maintenance Manual Issued October 15, 1988, Revision D Issued February 10, 2010.

Instruction for Continued Airworthiness contained in Manual No. 32HF-M Section 10.0 Issue date October 15, 1988, Revision D Issued February 10, 2010.

Weight and Balance Changes

	Weight	Arm Station
6 Fairings and Hardware	1.2 lbs	133

Weight and balance adjusted accordingly in aircraft records.

End

Additional Sheets Are Attached



US Department  
of Transportation  
Federal Aviation  
Administration

**MAJOR REPAIR AND ALTERATION  
(Airframe, Powerplant, Propeller, or Appliance)**

OMB No. 2120-0020  
Exp: 5/31/2018

Electronic Tracking Number

For FAA Use Only

INSTRUCTIONS: Print or type all entries. See Title 14 CFR §43.9, Part 43 Appendix B, and AC 43.9-1 (or subsequent revision thereof) for instructions and disposition of this form. This report is required by law (49 U.S.C. §44701). Failure to report can result in a civil penalty for each such violation. (49 U.S.C. §46301(a))

1. Aircraft	Nationality and Registration Mark N8442H	Serial No. 32-8106098	
	Make PIPER	Model PA32-301	Series 31
2. Owner	Name (As shown on registration certificate) CHIVERS CONSTRUCTION INC	Address (As shown on registration certificate) Address 1795 DETROIT BLVD	
		City PENSACOLA State FL	Zip 32534 Country USA

3. For FAA Use Only

4. Type		5. Unit Identification			
Repair	Alteration	Unit	Make	Model	Serial No.
<input type="checkbox"/>	<input checked="" type="checkbox"/>	AIRFRAME	PIPER	(As described in Item 1 above)	32-8106098
<input type="checkbox"/>	<input type="checkbox"/>	POWERPLANT			
<input type="checkbox"/>	<input type="checkbox"/>	PROPELLER			
<input type="checkbox"/>	<input type="checkbox"/>	APPLIANCE	Type		
			Manufacturer		

6. Conformity Statement

A. Agency's Name and Address		B. Kind of Agency		C. Certificate No.
Name RICHARD CHAMPUT	Address 4731 SUMMIT DR. City MILL BROOK State AL Zip 36054 Country USA	<input checked="" type="checkbox"/> U. S. Certificated Mechanic	Manufacturer	
		<input type="checkbox"/> Foreign Certificated Mechanic	3321294	
		<input type="checkbox"/> Certificated Repair Station		
		<input type="checkbox"/> Certificated Maintenance Organization		

D. I certify that the repair and/or alteration made to the unit(s) identified in item 5 above and described on the reverse or attachments hereto have been made in accordance with the requirements of Part 43 of the U.S. Federal Aviation Regulations and that the information furnished herein is true and correct to the best of my knowledge.

Extended range fuel per 14 CFR Part 43 App. B <input type="checkbox"/>	Signature/Date of Authorized Individual <i>Richard Champut</i> 09-13-2016
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7. Approval for Return to Service

Pursuant to the authority given persons specified below, the unit identified in item 5 was inspected in the manner prescribed by the Administrator of the Federal Aviation Administration and is  Approved  Rejected

BY	FAA Flt. Standards Inspector	Manufacturer	Maintenance Organization	Persons Approved by Canadian Department of Transport
	FAA Designee	Repair Station	<input checked="" type="checkbox"/> Inspection Authorization	Other (Specify)

Certificate or Designation No. 3440120	Signature/Date of Authorized Individual <i>Edward J. Davis</i> 9/13/2016
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NOTICE

Weight and balance or operating limitation changes shall be entered in the appropriate aircraft record. An alteration must be compatible with all previous alterations to assure continued conformity with the applicable airworthiness requirements.

8. Description of Work Accomplished

(If more space is required, attach additional sheets. Identify with aircraft nationality and registration mark and date work completed.)

N8442H

9/10/2016

Nationality and Registration Mark

Date

Installed flap/fuselage and stabilator gap seals in accordance with Knots 2U Ltd. STC No. SA1521GL issued September 06,1990 Rev. F issued February 5, 2010 and Manual No. 32FGS-M.

Aileron gap seal not installed at this time.

Instructions for Continued Airworthiness are contained in Manual No. 32FGS-M Section 10 under Maintenance / Instructions for Continued Airworthiness.

Weight and balance changes:

	Weight	Arm Sta.
flap gap seal	1.0 lbs	129
flap / fuselage seal	.014	129
stabilator gap seal	.042	301

Aircraft weight and balance adjusted accordingly in aircraft logs.

End

Additional Sheets Are Attached



US Department of Transportation  
Federal Aviation Administration

## MAJOR REPAIR AND ALTERATION (Airframe, Powerplant, Propeller, or Appliance)

Form Approved  
OMB No. 2120-0020  
11/30/2007

Electronic Tracking Number

For FAA Use Only

INSTRUCTIONS: Print or type all entries. See Title 14 CFR §43.9, Part 43 Appendix B, and AC 43.9-1 (or subsequent revision thereof) for instructions and disposition of this form. This report is required by law (49 U.S.C. §44701). Failure to report can result in a civil penalty for each such violation. (49 U.S.C. §46301(a)).

<b>1. Aircraft</b>	Nationality and Registration Mark <u>N8442H</u>	Serial No. <u>32-8106098</u>	
	Make <u>Piper</u>	Model <u>PA-32-301</u>	Series <u>32</u>
<b>2. Owner</b>	Name (As shown on registration certificate) <u>Chavas Construction</u>	Address (As shown on registration certificate) <u>1795 Detroit Blvd</u>	
		City <u>Pensacola FL</u>	State <u>FL</u>
		Zip <u>32534</u>	Country <u>USA</u>

### 3. For FAA Use Only

4. Type		5. Unit Identification		
Repair	Alteration	Unit	Make	Model
<input type="checkbox"/>	<input type="checkbox"/>	AIRFRAME	_____	(As described in Item 1 above)
<input type="checkbox"/>	<input type="checkbox"/>	POWERPLANT	_____	_____
<input type="checkbox"/>	<input type="checkbox"/>	PROPELLER	_____	_____
<input type="checkbox"/>	<input type="checkbox"/>	APPLIANCE	Type	_____
			Manufacturer	_____

### 6. Conformity Statement

<b>A. Agency's Name and Address</b>		<b>B. Kind of Agency</b>	
Name	<u>Richard Chaput</u>	<input checked="" type="checkbox"/>	U. S. Certificated Mechanic
Address	<u>473 Summer Dr.</u>	<input type="checkbox"/>	Foreign Certificated Mechanic
City	<u>Millbrook</u> State <u>AL</u>	<input type="checkbox"/>	Certificated Repair Station
Zip	<u>36054</u> Country <u>USA</u>	<input type="checkbox"/>	Certificated Maintenance Organization
			C. Certificate No. <u>3321294</u>

D. I certify that the repair and/or alteration made to the unit(s) identified in item 5 above and described on the reverse or attachments hereto have been made in accordance with the requirements of Part 43 of the U.S. Federal Aviation Regulations and that the information furnished herein is true and correct to the best of my knowledge.

Extended range fuel per 14 CFR Part 43 App. B <input type="checkbox"/>	Signature/Date of Authorized Individual <u>Richard Chaput</u> <u>09-13-2016</u>
--	--

### 7. Approval for Return to Service

Pursuant to the authority given persons specified below, the unit identified in item 5 was inspected in the manner prescribed by the Administrator of the Federal Aviation Administration and is  Approved  Rejected

BY	FAA Fit. Standards Inspector	Manufacturer	Maintenance Organization	Persons Approved by Canadian Department of Transport
	FAA Designee	Repair Station	<input checked="" type="checkbox"/> Inspection Authorization	Other (Specify)

Certificate or Designation No. <u>3440120</u>	Signature/Date of Authorized Individual <u>Edward T. Davis</u> <u>9/13/16</u>
--	--



NOTICE

Weight and balance or operating limitation changes shall be entered in the appropriate aircraft record. An alteration must be compatible with all previous alterations to assure continued conformity with the applicable airworthiness requirements.

8. Description of Work Accomplished

(If more space is required, attach additional sheets. Identify with aircraft nationality and registration mark and date work completed.)

N8442H

9/10/2016

Nationality and Registration Mark

Date

Installed Tank Fair Wing Smoothing kit STC SA1486SO onto Piper PA- 32-301 S/N 32-8106098 In Accordance with Laminar Flow Systems Inc. drawing SW1000 and SW2000.

Negligible Weight Change

End

Additional Sheets Are Attached



US Department  
of Transportation  
Federal Aviation  
Administration

**MAJOR REPAIR AND ALTERATION**  
**(Airframe, Powerplant, Propeller, or Appliance)**

OMB No. 2120-0020  
Exp: 5/31/2018

Electronic Tracking Number

For FAA Use Only

INSTRUCTIONS: Print or type all entries. See Title 14 CFR §43.9, Part 43 Appendix B, and AC 43.9-1 (or subsequent revision thereof) for instructions and disposition of this form. This report is required by law (49 U.S.C. §44701). Failure to report can result in a civil penalty for each such violation. (49 U.S.C. §46301(a))

1. Aircraft	Nationality and Registration Mark N8442H	Serial No. 32-8106098
	Make PIPER	Model PA32-301
2. Owner	Name (As shown on registration certificate) CHIVERS CONSTRUCTION INC	Address (As shown on registration certificate) Address 1795 DETROIT BLVD
		City PENSACOLA State FL Zip 32534 Country USA

3. For FAA Use Only

4. Type		5. Unit Identification			
Repair	Alteration	Unit	Make	Model	Serial No.
<input type="checkbox"/>	<input checked="" type="checkbox"/>	AIRFRAME	PIPER	(As described in Item 1 above)	32-8106098
<input type="checkbox"/>	<input type="checkbox"/>	POWERPLANT			
<input type="checkbox"/>	<input type="checkbox"/>	PROPELLER			
<input type="checkbox"/>	<input type="checkbox"/>	APPLIANCE	Type		
			Manufacturer		

6. Conformity Statement

A. Agency's Name and Address		B. Kind of Agency		C. Certificate No.	
Name	RICHARD CHAMPUT	<input checked="" type="checkbox"/>	U. S. Certificated Mechanic	3321294	
Address	4731 SUMMIT DR.	<input type="checkbox"/>	Foreign Certificated Mechanic		
City	MILL BROOK State AL	<input type="checkbox"/>	Certificated Repair Station		
Zip	36054 Country USA	<input type="checkbox"/>	Certificated Maintenance Organization		

D. I certify that the repair and/or alteration made to the unit(s) identified in item 5 above and described on the reverse or attachments hereto have been made in accordance with the requirements of Part 43 of the U.S. Federal Aviation Regulations and that the information furnished herein is true and correct to the best of my knowledge.

Extended range fuel per 14 CFR Part 43 App. B <input type="checkbox"/>	Signature/Date of Authorized Individual <i>Richard Champut</i> 09-13-2016
--	--

7. Approval for Return to Service

Pursuant to the authority given persons specified below, the unit identified in item 5 was inspected in the manner prescribed by the Administrator of the Federal Aviation Administration and is  Approved  Rejected

BY	FAA Flt. Standards Inspector	Manufacturer	Maintenance Organization	Persons Approved by Canadian Department of Transport
	FAA Designee	Repair Station	<input checked="" type="checkbox"/> Inspection Authorization	Other (Specify)

Certificate or Designation No. 3440120	Signature/Date of Authorized Individual <i>David T. Davis</i> 9/13/2016
--	--

NOTICE

Weight and balance or operating limitation changes shall be entered in the appropriate aircraft record. An alteration must be compatible with all previous alterations to assure continued conformity with the applicable airworthiness requirements.

8. Description of Work Accomplished

(If more space is required, attach additional sheets. Identify with aircraft nationality and registration mark and date work completed.)

N8442H

9/10/2016

Nationality and Registration Mark

Date

REMOVED MAIN LANDING GEAR LEFT AND RIGHT HAND FAIRINGS PER PIPER PA-32-301 MAINTENANCE MANUAL 32-81-00.

INSTALLED LAMINAR FLOW SYSTEMS SPEED PANTS KIT ON MAIN LANDING GEAR PER LFS-4000 INSTALLATION INSTRUCTIONS. APPROVAL DATED AUGUST 13, 2014.

SUPPLEMENTAL TYPE CERTIFICATE NUMBER SA01143WI DATED MARCH 12, 2003 REISSUE.

INSTRUCTIONS FOR CONTINUED AIRWORTHINESS, WEIGHT AND BALANCE DIRECTION ARE INCLUDED IN LFS-4000 DATED AUGUST 13, 2014.

MAIN WHEEL FAIRINGS (REMOVED) 17.0 LBS ARM STA. 113.60

LEFT MAIN WHEEL SPEEDPANT 5.0 LBS ARM STA. 113.60

RIGHT MAIN WHEEL SPEEDPANT 5.8 LBS ARM STA. 113.60

HARDWARE FOR INSTALLATION OF WHEEL PANTS 3.2 LBS ARM STA. 113.60

AIRCRAFT WEIGHT AND BALANCE ADJUSTED ACCORDINGLY IN AIRCRAFT RECORDS.

Additional Sheets Are Attached



US Department  
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**MAJOR REPAIR AND ALTERATION  
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OMB No. 2120-0020  
Exp: 5/31/2018

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1. Aircraft	Nationality and Registration Mark N8442H	Serial No. 32-8106098	
	Make PIPER	Model PA32-301	Series 31
2. Owner	Name (As shown on registration certificate) CHAVERS CONSTRUCTION INC	Address (As shown on registration certificate) Address 1795 DETROIT BLVD	
		City PENSACOLA	State FL
		Zip 32534	Country USA

3. For FAA Use Only

4. Type		5. Unit Identification			
Repair	Alteration	Unit	Make	Model	Serial No.
<input type="checkbox"/>	<input checked="" type="checkbox"/>	AIRFRAME	PIPER	(As described in Item 1 above)	32-8106098
<input type="checkbox"/>	<input type="checkbox"/>	POWERPLANT			
<input type="checkbox"/>	<input type="checkbox"/>	PROPELLER			
<input type="checkbox"/>	<input type="checkbox"/>	APPLIANCE	Type		
			Manufacturer		

6. Conformity Statement

A. Agency's Name and Address		B. Kind of Agency		C. Certificate No.	
Name	RICHARD CHAMPUT	<input checked="" type="checkbox"/>	U. S. Certificated Mechanic	3321294	
Address	4731 SUMMIT DR.	<input type="checkbox"/>	Foreign Certificated Mechanic		
City	MILL BROOK State AL	<input type="checkbox"/>	Certificated Repair Station		
Zip	36054 Country USA	<input type="checkbox"/>	Certificated Maintenance Organization		

D. I certify that the repair and/or alteration made to the unit(s) identified in item 5 above and described on the reverse or attachments hereto have been made in accordance with the requirements of Part 43 of the U.S. Federal Aviation Regulations and that the information furnished herein is true and correct to the best of my knowledge.

Extended range fuel per 14 CFR Part 43 App. B <input type="checkbox"/>	Signature/Date of Authorized Individual <i>Richard Champut</i> 09-13-2016
--	--

7. Approval for Return to Service

Pursuant to the authority given persons specified below, the unit identified in item 5 was inspected in the manner prescribed by the Administrator of the Federal Aviation Administration and is  Approved  Rejected

BY	FAA Fit. Standards Inspector	Manufacturer	Maintenance Organization	Persons Approved by Canadian Department of Transport
	FAA Designee	Repair Station <input checked="" type="checkbox"/>	Inspection Authorization	Other (Specify)

Certificate or Designation No. 3440120	Signature/Date of Authorized Individual <i>Edward T. Davis</i> 01/13/2016
--	--

**NOTICE**

*Weight and balance or operating limitation changes shall be entered in the appropriate aircraft record. An alteration must be compatible with all previous alterations to assure continued conformity with the applicable airworthiness requirements.*

**8. Description of Work Accomplished**

*(If more space is required, attach additional sheets. Identify with aircraft nationality and registration mark and date work completed.)*

N8442H

9/10/2016

Nationality and Registration Mark

Date

Installed Piper PA-32 Wing Root Fairings (Left and Right) per Installation and Maintenance Manual 32WR-M Rev. E dated 2/5/10. STC No. SA1217GL amended March 29, 2010.

Maintenance / Instruction for Continued Airworthiness contained in Manual No. 32WR-M Rev. E dated 2/5/10.

**Weight and Balance Changes**

	<b>Weight</b>	<b>Arm Station</b>
Wing Root Fairings and Hardware	1.1 lbs	67.8

End

Additional Sheets Are Attached



US Department  
of Transportation  
Federal Aviation  
Administration

**MAJOR REPAIR AND ALTERATION  
(Airframe, Powerplant, Propeller, or Appliance)**

OMB No. 2120-0020  
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1. Aircraft	Nationality and Registration Mark N8442H	Serial No. 32-8106098
	Make PIPER	Model PA-32-301
2. Owner	Name (As shown on registration certificate) CHAVERS CONSTRUCTION INC	Address (As shown on registration certificate) Address 1795 DETROIT BLVD
		City PENSACOLA State FL Zip 32534 Country USA

3. For FAA Use Only

4. Type		5. Unit Identification			
Repair	Alteration	Unit	Make	Model	Serial No.
<input type="checkbox"/>	<input checked="" type="checkbox"/>	AIRFRAME	PIPER	(As described in Item 1 above)	32-8106098
<input type="checkbox"/>	<input type="checkbox"/>	POWERPLANT			
<input type="checkbox"/>	<input type="checkbox"/>	PROPELLER			
<input type="checkbox"/>	<input type="checkbox"/>	APPLIANCE	Type		
			Manufacturer		

6. Conformity Statement

A. Agency's Name and Address		B. Kind of Agency		C. Certificate No. <b>3321294</b>
Name RICHARD CHAPUT		<input checked="" type="checkbox"/> U. S. Certificated Mechanic	Manufacturer	
Address 4731 SUMMIT DR		Foreign Certificated Mechanic		
City MILL BROOK State AL		Certificated Repair Station		
Zip 36054 Country USA		Certificated Maintenance Organization		

D. I certify that the repair and/or alteration made to the unit(s) identified in item 5 above and described on the reverse or attachments hereto have been made in accordance with the requirements of Part 43 of the U.S. Federal Aviation Regulations and that the information furnished herein is true and correct to the best of my knowledge.

Extended range fuel per 14 CFR Part 43 App. B <input type="checkbox"/>	Signature/Date of Authorized Individual <i>Richard Chaput</i> 09/13/2016
--	---

7. Approval for Return to Service

Pursuant to the authority given persons specified below, the unit identified in item 5 was inspected in the manner prescribed by the Administrator of the Federal Aviation Administration and is  Approved  Rejected

BY	FAA Flt. Standards Inspector	Manufacturer	Maintenance Organization	Persons Approved by Canadian Department of Transport Other (Specify)
	FAA Designee	Repair Station	<input checked="" type="checkbox"/> Inspection Authorization	

Certificate or Designation No. 3440120	Signature/Date of Authorized Individual <i>Edward T. Davis</i> 9/13/2016
--	---

NOTICE

Weight and balance or operating limitation changes shall be entered in the appropriate aircraft record. An alteration must be compatible with all previous alterations to assure continued conformity with the applicable airworthiness requirements.

8. Description of Work Accomplished

(If more space is required, attach additional sheets. Identify with aircraft nationality and registration mark and date work completed.)

N8442H

9/10/2016

Nationality and Registration Mark

Date

INSTALLATION OF VORTEX GENERATORS ON THE WINGS AND VERTICAL TAIL SURFACES IN ACCORDANCE WITH DRAWING PACKAGE MA2188 REVISION A, DATED OCTOBER 26, 2009, AND INSTALLATION MANUAL MA 2189, REVISION B, DATED OCTOBER 26, 2009, PER STC # SA01266SE.

INSTRUCTIONS FOR CONTINUED AIRWORTHINESS OF MICRO VORTEX GENERATORS, SEE MICRODYNAMICS DOCUMENT MA0666, REVISION B.

NEGLIGIBLE WEIGHT CHANGE

END

Additional Sheets Are Attached



U.S. Department of  
Transportation  
Federal Aviation  
Administration

## MAJOR REPAIR AND ALTERATION (Airframe, PowerPlant, Propeller, or Appliance)

Form Approved  
OMB No. 2120-0020

For FAA Use Only

Office Identification

INSTRUCTIONS: Print or type all entries. See FAR 43.9, FAR 43 Appendix B, and AC 43.9-1 (or subsequent revision thereof) for instructions and disposition of this form. This report is required by law (49 U.S.C. 1421). Failure to report can result in a civil penalty not to exceed \$1,000 for each such violation (Section 901 Federal Aviation Act 1958)

<b>1. Aircraft</b>	Make Piper	Model Pa-32-301
	Serial No. 32-8106098	Nationality and Registration Mark N8442H
<b>2. Owner</b>	Name (As shown on registration certificate) Chavers Construction Inc.	Address (As shown on registration certificate) 1795 Detroit Blvd Pensacola FL 32534

### 3. For FAA Use Only

4. Unit Identification				5. Type	
Unit	Make	Model	Serial No.	Repair	Alteration
AIRFRAME	~~~~~(As described in item 1 above)~~~~~				X
POWERPLANT					
PROPELLER					
APPLIANCE	Type				
	Manufacturer				

### 6. Conformity Statement

A. Agency's Name and Address FLIGHT CONTROL SERVICES 5550 N AIRPORT RD MILTON, FL 32583	B. Kind of Agency <input type="checkbox"/> U.S. Certificated Mechanic <input type="checkbox"/> Foreign Certificated Mechanic <input checked="" type="checkbox"/> Certificated Repair Station <input type="checkbox"/> Manufacturer	C. Certificate No.  CRS 0FHR414L
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D. I certify that the repair and/or alteration made to the unit(s) identified in item 4 above and described on the reverse or attachments hereto have been made in accordance with the requirements of Part 43 of the U.S. Federal Aviation Regulations and that the information furnished herein is true and correct to the best of my knowledge.

Date August 10, 2017	Signature of Authorized Individual DAN FRENCH
-------------------------	--

### 7. Approval for Return to Service

Pursuant to the authority given persons specified below, the unit identified in item 4 was inspected in the manner prescribed by the Administrator of the Federal Aviation Administration and is  APPROVED  REJECTED

BY	FAA Fit Standards Inspector		Manufacturer	Inspection Authorization	Other (Specify)
	FAA Designee	X	Repair Station	Person Approved by Transport Canada Airworthiness Group	
Date of Approval or Rejection August 10, 2017		Certificate or Designation No. 0FHR414L		Signature of Authorized Individual 	



**NOTICE**

Weight and balance or operating limitation changes shall be entered in the appropriate aircraft record. An alteration must be compatible with all previous alterations to assure continued conformity with the applicable airworthiness requirements.

**.....AVIONICS INSTALLATION (PAGE 1 OF 1).....**

THE FOLLOWING IS A DESCRIPTION OF ITEMS INSTALLED IN THE AIRCRAFT LISTED ON BLOCK 1. ALL WORK CONFORMS TO ACCEPTABLE METHODS USING PREVIOUSLY APPROVED DATA PROVIDED BY THE FEDERAL AVIATION ADMINISTRATION, AND THE MANUFACTURER.

APPAERO ESG MODE S/ADS-B OUT TRANSPONDER UNDER APPAERO ESG STC SA04112CH USING MANUFACTURER'S INSTALLATION MANUAL #600840-000032 REV 1.4 06/22/2016.

ITEMS REMOVED: KT-76A MODE A/C TRANSPONDER. NO OTHER CHANGES HAVE BEEN MADE NOR HAS THERE BEEN ANY DEVIATION TO STC.

**1. INSTALLATION 1090ES**

INSTALLATION WAS ACCOMPLISHED USING APPAERO TECH DATA INCLUDING INSTALL MANUAL #600840-000032 REV 1.4 06/22/2016. ESG INSTALLED SECURELY IN RADIO STACK REPLACING EXISTING TRANSPONDER AND ACCESSIBLE BY FLIGHT CREW USING MATERIALS SUPPLIED AS A KIT BY THE MANUFACTURER. INTERFACED ESG TO EXISTING MODE C ENCODER, ANTENNA AND DC POWER SOURCE THIS INSTALLATION IS A FOLLOW ON TO STC NO. SA04112CH. THE INSTALLED ADS-B OUT SYSTEM WAS SHOWN TO MEET THE EQUIPMENT PERFORMANCE REQUIREMENTS OF 14 CFR PART 91.227.

**2. INSPECTION**

THIS EQUIPMENT GROUND TESTED IN AIRCRAFT, AND FOUND NOT TO BE A SOURCE OF OBJECTIONABLE ELECTROMAGNETIC INTERFERENCE. FUNCTION TESTING CONFIRMS PROPER AND SAFE OPERATION IN ACCORDANCE WITH THE MANUFACTURERS SPECIFICATIONS. SAFETY OF MOUNTING AND CLEARANCE FROM ALL MOVABLE CONTROL LINKAGES AND CABLES OF THIS EQUIPMENT AND WIRING INTERFACE WERE FOUND TO CONFORM WITH THE AIRFRAME MANUFACTURERS SPECIFICATIONS AND SA04112CH. A SURVEY OF THIS AIRCRAFT'S ELECTRICAL POWER GENERATION CAPABILITY SHOWS SYSTEM DEMAND WILL NOT EXCEED 70% OF RATED OUTPUT. (PART 23.1351).

**3. APPROVAL**

AS PER STC: THE APPROVAL BASIS IS BY FOLLOW ON STC DATE ISSUED 07/07/2016. REFERENCE SA04112CH. THIS INSTALLATION IS IAW APPAERO INSTALLATION MANUAL #600840-000032 REV 1.5 09/22/2016 (THE MOST CURRENT).

**4. RETURN TO SERVICE**

A TEST FLIGHT WAS PERFORMED ON 08/10/2017 AND THE ESG OPERATED AS SPECIFIED. THE APPAERO ESG ICA PART NUMBER #600845-000025 REV 1.2 06/22/2016 WAS COMPLETED ON THIS DATE AND INSERTED INTO MAINTENANCE RECORDS, INCLUDING WORKSHEETS, DIAGRAMS AND CONFIGURATION. THE APPROVED APPAERO ESG APPROVED FLIGHT MANUAL SUPPLEMENT WAS COMPLETED ON THIS DATE AND INSTALLED IN AIRCRAFT.

AIRCRAFT WEIGHT AND BALANCE HAS BEEN RECOMPUTED AND ENTERED AS A PERMANENT RECORD IN THE PROPER SECTION OF THE FLIGHT MANUAL. THE EQUIPMENT LIST HAS BEEN UPDATED IN THE STYLE FOR THIS AIRFRAME. A LOGBOOK ENTRY HAS BEEN MADE. AIRCRAFT HAS BEEN APPROVED FOR RETURN TO SERVICE.

.....**END**.....

Additional Sheets Are Attached

# STRATUS



## Installation Instructions

Revision 1.5

APPAREO

<b>This document and the information contained herein are the property of Appareo Systems, LLC and are confidential. They may not be disseminated or redistributed without the written permission of Appareo Systems, LLC</b>	<b>APPAREO SYSTEMS, LLC</b> FARGO, NORTH DAKOTA 58102			
	<b>Stratus ESG Installation Instructions</b>			
Document Number <b>600840-000032</b>	Document Type Certification	Last Revised 22 September 2016	Rev 1.5	Sheet 1 of 47



US Department of Transportation  
Federal Aviation Administration

**MAJOR REPAIR AND ALTERATION**  
**(Airframe, Powerplant, Propeller, or Appliance)**

OMB No. 2120-0020  
Exp: 5/31/2018

Electronic Tracking Number

For FAA Use Only

INSTRUCTIONS: Print or type all entries. See Title 14 CFR §43.9, Part 43 Appendix B, and AC 43.9-1 (or subsequent revision thereof) for instructions and disposition of this form. This report is required by law (49 U.S.C. §44701). Failure to report can result in a civil penalty for each such violation. (49 U.S.C. §46301(a))

1. Aircraft	Nationality and Registration Mark N8442H	Serial No. 32-8106098	
	Make PIPER	Model PA32-301	Series 31
2. Owner	Name (As shown on registration certificate) CHAVERS CONSTRUCTION INC	Address (As shown on registration certificate)	
		Address 1795 DETROIT BLVD	
		City PENSACOLA	State FL
		Zip 32534	Country USA

3. For FAA Use Only

4. Type		5. Unit Identification			
Repair	Alteration	Unit	Make	Model	Serial No.
<input type="checkbox"/>	<input checked="" type="checkbox"/>	AIRFRAME	PIPER	(As described in Item 1 above)	32-8106098
<input type="checkbox"/>	<input type="checkbox"/>	POWERPLANT			
<input type="checkbox"/>	<input type="checkbox"/>	PROPELLER			
<input type="checkbox"/>	<input type="checkbox"/>	APPLIANCE	Type		
			Manufacturer		

6. Conformity Statement

A. Agency's Name and Address		B. Kind of Agency		C. Certificate No.  <b>3321294</b>
Name RICHARD CHAMPUT		<input checked="" type="checkbox"/> U. S. Certificated Mechanic	Manufacturer	
Address 4731 SUMMIT DR.		<input type="checkbox"/> Foreign Certificated Mechanic		
City MILL BROOK State AL		<input type="checkbox"/> Certificated Repair Station		
Zip 36054 Country USA		<input type="checkbox"/> Certificated Maintenance Organization		

D. I certify that the repair and/or alteration made to the unit(s) identified in item 5 above and described on the reverse or attachments hereto have been made in accordance with the requirements of Part 43 of the U.S. Federal Aviation Regulations and that the information furnished herein is true and correct to the best of my knowledge.

Extended range fuel per 14 CFR Part 43 App. B <input type="checkbox"/>	Signature/Date of Authorized Individual <i>Richard Champut</i> 09-13-2016
--	--

7. Approval for Return to Service

Pursuant to the authority given persons specified below, the unit identified in item 5 was inspected in the manner prescribed by the Administrator of the Federal Aviation Administration and is  Approved  Rejected

BY	FAA Fit. Standards Inspector	Manufacturer	Maintenance Organization	Persons Approved by Canadian Department of Transport
	FAA Designee	Repair Station	<input checked="" type="checkbox"/> Inspection Authorization	Other (Specify)

Certificate or Designation No. 3440120	Signature/Date of Authorized Individual <i>David T. Davis</i> 9/13/2016
--	--

NOTICE

Weight and balance or operating limitation changes shall be entered in the appropriate aircraft record. An alteration must be compatible with all previous alterations to assure continued conformity with the applicable airworthiness requirements.

8. Description of Work Accomplished

(If more space is required, attach additional sheets. Identify with aircraft nationality and registration mark and date work completed.)

N8442H

9/10/2016

Nationality and Registration Mark

Date

Installed Flap Hinge Fairing STC # SA1195GL Kit In accordance with Knots 2u Ltd., Installation and Maintenance Manual Issued October 15, 1988, Revision D Issued February 10, 2010.

Instruction for Continued Airworthiness contained in Manual No. 32HF-M Section 10.0 Issue date October 15, 1988, Revision D Issued February 10, 2010.

Weight and Balance Changes

	Weight	Arm Station
6 Fairings and Hardware	1.2 lbs	133

Weight and balance adjusted accordingly in aircraft records.

End

Additional Sheets Are Attached



US Department  
of Transportation  
Federal Aviation  
Administration

**MAJOR REPAIR AND ALTERATION  
(Airframe, Powerplant, Propeller, or Appliance)**

OMB No. 2120-0020  
Exp: 5/31/2018

Electronic Tracking Number

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INSTRUCTIONS: Print or type all entries. See Title 14 CFR §43.9, Part 43 Appendix B, and AC 43.9-1 (or subsequent revision thereof) for instructions and disposition of this form. This report is required by law (49 U.S.C. §44701). Failure to report can result in a civil penalty for each such violation. (49 U.S.C. §46301(a))

1. Aircraft	Nationality and Registration Mark N8442H	Serial No. 32-8106098
	Make PIPER	Model PA32-301
2. Owner	Name (As shown on registration certificate) CHAVERS CONSTRUCTION INC	Address (As shown on registration certificate) Address 1795 DETROIT BLVD
		City PENSACOLA State FL Zip 32534 Country USA

3. For FAA Use Only

4. Type		5. Unit Identification			
Repair	Alteration	Unit	Make	Model	Serial No.
<input type="checkbox"/>	<input checked="" type="checkbox"/>	AIRFRAME	PIPER	(As described in Item 1 above)	32-8106098
<input type="checkbox"/>	<input type="checkbox"/>	POWERPLANT			
<input type="checkbox"/>	<input type="checkbox"/>	PROPELLER			
<input type="checkbox"/>	<input type="checkbox"/>	APPLIANCE	Type Manufacturer		

6. Conformity Statement

A. Agency's Name and Address		B. Kind of Agency	
Name RICHARD CHAMPUT	Address 4751 SUMMIT DR.	<input checked="" type="checkbox"/> U. S. Certificated Mechanic	Manufacturer
City MILL BROOK State AL	Zip 36054 Country USA	<input type="checkbox"/> Foreign Certificated Mechanic	C. Certificate No.
		<input type="checkbox"/> Certificated Repair Station	3321294
		<input type="checkbox"/> Certificated Maintenance Organization	

D. I certify that the repair and/or alteration made to the unit(s) identified in item 5 above and described on the reverse or attachments hereto have been made in accordance with the requirements of Part 43 of the U.S. Federal Aviation Regulations and that the information furnished herein is true and correct to the best of my knowledge.

Extended range fuel per 14 CFR Part 43 App. B <input type="checkbox"/>	Signature/Date of Authorized Individual <i>Richard Champut</i> 09-13-2016
--	--

7. Approval for Return to Service

Pursuant to the authority given persons specified below, the unit identified in item 5 was inspected in the manner prescribed by the Administrator of the Federal Aviation Administration and is  Approved  Rejected

BY	FAA Fit. Standards Inspector	Manufacturer	Maintenance Organization	Persons Approved by Canadian Department of Transport
	FAA Designee	Repair Station	<input checked="" type="checkbox"/> Inspection Authorization	

Certificate or Designation No. 3440120	Signature/Date of Authorized Individual <i>Edward J. Davis</i> 9/13/2016
--	---

NOTICE

Weight and balance or operating limitation changes shall be entered in the appropriate aircraft record. An alteration must be compatible with all previous alterations to assure continued conformity with the applicable airworthiness requirements.

8. Description of Work Accomplished

(If more space is required, attach additional sheets. Identify with aircraft nationality and registration mark and date work completed.)

N8442H

9/10/2016

Nationality and Registration Mark

Date

Installed flap/fuselage and stabilator gap seals in accordance with Knots 2U Ltd. STC No. SA1521GL issued September 06, 1990 Rev. F issued February 5, 2010 and Manual No. 32FGS-M.

Aileron gap seal not installed at this time.

Instructions for Continued Airworthiness are contained in Manual No. 32FGS-M Section 10 under Maintenance / Instructions for Continued Airworthiness.

Weight and balance changes:

	Weight	Arm Sta.
flap gap seal	1.0 lbs	129
flap / fuselage seal	.014	129
stabilator gap seal	.042	301

Aircraft weight and balance adjusted accordingly in aircraft logs.

End

Additional Sheets Are Attached



US Department of Transportation  
Federal Aviation Administration

**MAJOR REPAIR AND ALTERATION  
(Airframe, Powerplant, Propeller, or Appliance)**

OMB No. 2120-0020  
Exp: 5/31/2018

Electronic Tracking Number

For FAA Use Only

INSTRUCTIONS: Print or type all entries. See Title 14 CFR §43.9, Part 43 Appendix B, and AC 43.9-1 (or subsequent revision thereof) for instructions and disposition of this form. This report is required by law (49 U.S.C. §44701). Failure to report can result in a civil penalty for each such violation. (49 U.S.C. §46301(a))

1. Aircraft	Nationality and Registration Mark N8442H	Serial No. 32-8106098	
	Make PIPER	Model PA32-301	Series 31
2. Owner	Name (As shown on registration certificate) CHAVERS CONSTRUCTION INC	Address (As shown on registration certificate) Address 1795 DETROIT BLVD	
		City PENSACOLA	State FL
		Zip 32534	Country USA

3. For FAA Use Only

4. Type		5. Unit Identification			
Repair	Alteration	Unit	Make	Model	Serial No.
<input type="checkbox"/>	<input checked="" type="checkbox"/>	AIRFRAME	PIPER	(As described in Item 1 above)	32-8106098
<input type="checkbox"/>	<input type="checkbox"/>	POWERPLANT			
<input type="checkbox"/>	<input type="checkbox"/>	PROPELLER			
<input type="checkbox"/>	<input type="checkbox"/>	APPLIANCE	Type		
			Manufacturer		

6. Conformity Statement

A. Agency's Name and Address		B. Kind of Agency		C. Certificate No.  3321294
Name RICHARD CHAMPUT		<input checked="" type="checkbox"/> U. S. Certificated Mechanic	Manufacturer	
Address 4731 SUMMIT DR.		<input type="checkbox"/> Foreign Certificated Mechanic		
City MILL BROOK State AL		<input type="checkbox"/> Certificated Repair Station		
Zip 36054 Country USA		<input type="checkbox"/> Certificated Maintenance Organization		

D. I certify that the repair and/or alteration made to the unit(s) identified in item 5 above and described on the reverse or attachments hereto have been made in accordance with the requirements of Part 43 of the U.S. Federal Aviation Regulations and that the information furnished herein is true and correct to the best of my knowledge.

Extended range fuel per 14 CFR Part 43 App. B <input type="checkbox"/>	Signature/Date of Authorized Individual <i>Richard Champut</i> 09-13-2016
--	--

7. Approval for Return to Service

Pursuant to the authority given persons specified below, the unit identified in item 5 was inspected in the manner prescribed by the Administrator of the Federal Aviation Administration and is  Approved  Rejected

BY	FAA Fit. Standards Inspector	Manufacturer	Maintenance Organization	Persons Approved by Canadian Department of Transport
	FAA Designee	Repair Station	<input checked="" type="checkbox"/> Inspection Authorization	Other (Specify)

Certificate or Designation No. 3440120	Signature/Date of Authorized Individual <i>David T. Davis</i> 9/13/2016
--	--

NOTICE

Weight and balance or operating limitation changes shall be entered in the appropriate aircraft record. An alteration must be compatible with all previous alterations to assure continued conformity with the applicable airworthiness requirements.

8. Description of Work Accomplished

(If more space is required, attach additional sheets. Identify with aircraft nationality and registration mark and date work completed.)

N8442H

9/10/2016

Nationality and Registration Mark

Date

REMOVED MAIN LANDING GEAR LEFT AND RIGHT HAND FAIRINGS PER PIPER PA-32-301 MAINTENANCE MANUAL 32-81-00.

INSTALLED LAMINAR FLOW SYSTEMS SPEED PANTS KIT ON MAIN LANDING GEAR PER LFS-4000 INSTALLATION INSTRUCTIONS. APPROVAL DATED AUGUST 13, 2014.

SUPPLEMENTAL TYPE CERTIFICATE NUMBER SA01143WI DATED MARCH 12, 2003 REISSUE.

INSTRUCTIONS FOR CONTINUED AIRWORTHINESS, WEIGHT AND BALANCE DIRECTION ARE INCLUDED IN LFS-4000 DATED AUGUST 13, 2014.

MAIN WHEEL FAIRINGS (REMOVED) 17.0 LBS ARM STA. 113.60

LEFT MAIN WHEEL SPEEDPANT 5.0 LBS ARM STA. 113.60

RIGHT MAIN WHEEL SPEEDPANT 5.8 LBS ARM STA. 113.60

HARDWARE FOR INSTALLATION OF WHEEL PANTS 3.2 LBS ARM STA. 113.60

AIRCRAFT WEIGHT AND BALANCE ADJUSTED ACCORDINGLY IN AIRCRAFT RECORDS.

Additional Sheets Are Attached





US Department of Transportation  
Federal Aviation Administration

**MAJOR REPAIR AND ALTERATION  
(Airframe, Powerplant, Propeller, or Appliance)**

OMB No. 2120-0020  
Exp: 5/31/2018

Electronic Tracking Number

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1. Aircraft	Nationality and Registration Mark N8442H	Serial No. 32-8106098	
	Make PIPER	Model PA32-301	Series 31
2. Owner	Name (As shown on registration certificate) CHAVERS CONSTRUCTION INC	Address (As shown on registration certificate) Address 1795 DETROIT BLVD	
		City PENSACOLA	State FL
		Zip 32534	Country USA

3. For FAA Use Only

4. Type		5. Unit Identification			
Repair	Alteration	Unit	Make	Model	Serial No.
<input type="checkbox"/>	<input checked="" type="checkbox"/>	AIRFRAME	PIPER	(As described in Item 1 above)	32-8106098
<input type="checkbox"/>	<input type="checkbox"/>	POWERPLANT			
<input type="checkbox"/>	<input type="checkbox"/>	PROPELLER			
<input type="checkbox"/>	<input type="checkbox"/>	APPLIANCE	Type		
			Manufacturer		

6. Conformity Statement

A. Agency's Name and Address		B. Kind of Agency		C. Certificate No.	
Name	RICHARD CHAMPUT	<input checked="" type="checkbox"/>	U. S. Certificated Mechanic	3321294	
Address	4731 SUMMIT DR.	<input type="checkbox"/>	Foreign Certificated Mechanic		
City	MILL BROOK State AL	<input type="checkbox"/>	Certificated Repair Station		
Zip	36054 Country USA	<input type="checkbox"/>	Certificated Maintenance Organization		

D. I certify that the repair and/or alteration made to the unit(s) identified in item 5 above and described on the reverse or attachments hereto have been made in accordance with the requirements of Part 43 of the U.S. Federal Aviation Regulations and that the information furnished herein is true and correct to the best of my knowledge.

Extended range fuel per 14 CFR Part 43 App. B <input type="checkbox"/>	Signature/Date of Authorized Individual <i>Richard Champut</i> 09-13-2016
--	--

7. Approval for Return to Service

Pursuant to the authority given persons specified below, the unit identified in item 5 was inspected in the manner prescribed by the Administrator of the Federal Aviation Administration and is  Approved  Rejected

BY	FAA Fit. Standards Inspector	Manufacturer	Maintenance Organization	Persons Approved by Canadian Department of Transport
	FAA Designee	Repair Station <input checked="" type="checkbox"/>	Inspection Authorization	Other (Specify)

Certificate or Designation No. 3440120	Signature/Date of Authorized Individual <i>Edward T. Davis</i> 01/13/2016
--	--

NOTICE

Weight and balance or operating limitation changes shall be entered in the appropriate aircraft record. An alteration must be compatible with all previous alterations to assure continued conformity with the applicable airworthiness requirements.

8. Description of Work Accomplished

(If more space is required, attach additional sheets. Identify with aircraft nationality and registration mark and date work completed.)

N8442H

9/10/2016

Nationality and Registration Mark

Date

Installed Piper PA-32 Wing Root Fairings (Left and Right) per Installation and Maintenance Manual 32WR-M Rev. E dated 2/5/10. STC No. SA1217GL amended March 29, 2010.

Maintenance / Instruction for Continued Airworthiness contained in Manual No. 32WR-M Rev. E dated 2/5/10.

Weight and Balance Changes

	Weight	Arm Station
Wing Root Fairings and Hardware	1.1 lbs	67.8

End

Additional Sheets Are Attached



US Department of Transportation  
Federal Aviation Administration

## MAJOR REPAIR AND ALTERATION (Airframe, Powerplant, Propeller, or Appliance)

Form Approved  
OMB No. 2120-0020  
11/30/2007

Electronic Tracking Number

For FAA Use Only

INSTRUCTIONS: Print or type all entries. See Title 14 CFR §43.9, Part 43 Appendix B, and AC 43.9-1 (or subsequent revision thereof) for instructions and disposition of this form. This report is required by law (49 U.S.C. §44701). Failure to report can result in a civil penalty for each such violation. (49 U.S.C. §46301(a))

<b>1. Aircraft</b>	Nationality and Registration Mark <u>N8442H</u>	Serial No. <u>32-8106098</u>
	Make <b>Piper</b>	Model <u>PA-32-301</u> Series <u>32</u>
<b>2. Owner</b>	Name (As shown on registration certificate) <u>CHAVAS CONSTRUCTION</u>	Address (As shown on registration certificate) <u>1795 Detroit Blvd</u>
		City <u>Pensacola FL</u> State <u>FL</u> Zip <u>32534</u> Country <u>USA</u>

### 3. For FAA Use Only

4. Type		5. Unit Identification		
Repair	Alteration	Unit	Make	Model
<input type="checkbox"/>	<input type="checkbox"/>	AIRFRAME	_____	(As described in Item 1 above)
<input type="checkbox"/>	<input type="checkbox"/>	POWERPLANT	_____	_____
<input type="checkbox"/>	<input type="checkbox"/>	PROPELLER	_____	_____
<input type="checkbox"/>	<input type="checkbox"/>	APPLIANCE	Type	_____
			Manufacturer	_____

### 6. Conformity Statement

<b>A. Agency's Name and Address</b>		<b>B. Kind of Agency</b>		<b>C. Certificate No.</b>	
Name	<u>Richard Chaput</u>	<input checked="" type="checkbox"/>	U. S. Certificated Mechanic	<input type="checkbox"/>	Manufacturer
Address	<u>4731 Summer Dr.</u>	<input type="checkbox"/>	Foreign Certificated Mechanic	<input type="checkbox"/>	
City	<u>Millbrook</u> State <u>AL</u>	<input type="checkbox"/>	Certificated Repair Station	<input type="checkbox"/>	
Zip	<u>36054</u> Country <u>USA</u>	<input type="checkbox"/>	Certificated Maintenance Organization	<input type="checkbox"/>	<u>3321294</u>

D. I certify that the repair and/or alteration made to the unit(s) identified in item 5 above and described on the reverse or attachments hereto have been made in accordance with the requirements of Part 43 of the U.S. Federal Aviation Regulations and that the information furnished herein is true and correct to the best of my knowledge.

Extended range fuel per 14 CFR Part 43 App. B <input type="checkbox"/>	Signature/Date of Authorized Individual <u>Richard Chaput</u> <u>09-13-2016</u>
--	--

### 7. Approval for Return to Service

Pursuant to the authority given persons specified below, the unit identified in item 5 was inspected in the manner prescribed by the Administrator of the Federal Aviation Administration and is  Approved  Rejected

<b>BY</b>	FAA Fit. Standards Inspector	Manufacturer	Maintenance Organization	Persons Approved by Canadian Department of Transport
	FAA Designee	Repair Station	<input checked="" type="checkbox"/> Inspection Authorization	Other (Specify)

Certificate or Designation No. <u>3440120</u>	Signature/Date of Authorized Individual <u>Edward T. Davis</u> <u>9/13/2016</u>
--	--

**NOTICE**

*Weight and balance or operating limitation changes shall be entered in the appropriate aircraft record. An alteration must be compatible with all previous alterations to assure continued conformity with the applicable airworthiness requirements.*

**8. Description of Work Accomplished**

*(If more space is required, attach additional sheets. Identify with aircraft nationality and registration mark and date work completed.)*

N8442H

9/10/2016

Nationality and Registration Mark

Date

Installed Tank Fair Wing Smoothing kit STC SA1486SO onto Piper PA- 32-301 S/N 32-8106098 In Accordance with Laminar Flow Systems Inc. drawing SW1000 and SW2000.

Consult Piper Maintenance Manual for continued Air Worthiness PA-32-301 Chapter 4

**Negligible Weight Change**

End

Additional Sheets Are Attached

NOTICE

Weight and balance or operating limitation changes shall be entered in the appropriate aircraft record. An alteration must be compatible with all previous alterations to assure continued conformity with the applicable airworthiness requirements.

8. Description of Work Accomplished

(If more space is required, attach additional sheets. Identify with aircraft nationality and registration mark and date work completed.)

N8442H

9/10/2016

Nationality and Registration Mark

Date

INSTALLATION OF VORTEX GENERATORS ON THE WINGS AND VERTICAL TAIL SURFACES IN ACCORDANCE WITH DRAWING PACKAGE MA2188 REVISION A, DATED OCTOBER 26, 2009, AND INSTALLATION MANUAL MA 2189, REVISION B, DATED OCTOBER 26, 2009, PER STC # SA01266SE.

INSTRUCTIONS FOR CONTINUED AIRWORTHINESS OF MICRO VORTEX GENERATORS, SEE MICRODYNAMICS DOCUMENT MA0666, REVISION B.

NEGLIGIBLE WEIGHT CHANGE

END

Additional Sheets Are Attached



U.S. Department  
of Transportation  
Federal Aviation  
Administration

## MAJOR REPAIR AND ALTERATION (Airframe, Powerplant, Propeller, or Appliance)

Form Approved  
OMB No. 2120-0020  
11/30/2007

Electronic Tracking Number

For FAA Use Only

**INSTRUCTIONS:** Print or type all entries. See Title CFR 43.9, Part 43 Appendix B, and AC 43.9-1 (or subsequent revision thereof) for instructions and disposition of this form. This report is required by law (49 U.S.C. 44701). Failure to report can result in a civil penalty for each such violation (49 U.S.C. 46301(a)).

<b>1. Aircraft</b>	Nationality and Registration Mark N8442H	Serial No. 32-8106098	
	Make PIPER	Model PA32-301	Series
<b>2. Owner</b>	Name (As shown on registration certificate) THOMAS HARDMAN LLC	Address (As shown on registration certificate)	
		Address 2933 POINTE DR City GAINESVILLE State GA Zip 30506 Country USA	

### 3. For FAA Use Only

4. Type		5. Unit Identification			
Repair	Alteration	Unit	Make	Model	Serial No.
<input type="checkbox"/>	<input checked="" type="checkbox"/>	AIRFRAME	_____	(As described in item 1 above)	_____
<input type="checkbox"/>	<input type="checkbox"/>	POWERPLANT			
<input type="checkbox"/>	<input type="checkbox"/>	PROPELLER			
<input type="checkbox"/>	<input type="checkbox"/>	APPLIANCE	Type		
			Manufacturer		

### 6. Conformity Statement

<b>A. Agency's Name and Address</b>		<b>B. Kind of Agency</b>	
Name	DAYTONA AIRCRAFT SERVICES	U.S. Certificated Mechanic	Manufacturer
Address	561 PEARL HARBOR DR	Foreign Certificated Mechanic	<b>C. Certificate No.</b>
City	DAYTONA BEACH State FL	<input checked="" type="checkbox"/> Certificated Repair Station	
Zip	32114 Country USA	Certificated Maintenance Organization	DYTR262K

D. I certify that the repair and/or alteration made to the unit(s) identified in item 5 above and described on the reverse or attachments hereto have been made in accordance with the requirements of Part 43 of the U.S. Federal Aviation Regulations and that the information furnished herein is true and correct to the best of my knowledge.

Extended range fuel per 14 CFR Part 43 App. B <input type="checkbox"/>	Signature/Date of Authorized Individual	JULY 9, 2009
--	---	--------------

### 7. Approval for Return To Service

Pursuant to the authority given persons specified below, the unit identified in item 5 was inspected in the manner prescribed by the Administrator of the Federal Aviation Administration and is  APPROVED  REJECTED

BY	FAA Fit. Standards Inspector	Manufacturer	Maintenance Organization	Person Approved by Canadian Department of Transport
	FAA Designee	<input checked="" type="checkbox"/> Repair Station	Inspection Authorization	Other (Specify)
Certificate or Designation No. DYTR262K		Signature/Date of Authorized Individual		
		JULY 9 2009		

**NOTICE**

*Weight and balance or operating limitation changes shall be entered in the appropriate aircraft record. An alteration must be compatible with all previous alterations to assure continued conformity with the applicable airworthiness requirements.*

**8. Description of Work Accomplished**

*(If more space is required, attach additional sheets. Identify with aircraft nationality and registration mark and date work completed.)*

N8442H

JULY 9, 2009

Nationality and Registration Mark

Date

INSTALLED ROSEN SUNVISOR IN ACCORDANCE WITH FAA APPROVED ROSEN DRAWING LIST # RPL-00DL, REV C DATED MARCH 3, 2005 AND STC SA00072SE. NO CHANGE IN WEIGHT AND BALANCE.

\*\*\*\*\* NOTHING FOLLOWS \*\*\*\*\*

Additional Sheets Are Attached

# Supplemental Type Certificate

Number SA00072SE

*This certificate, issued to*

**Rosen Sunvisor Systems, LLC  
86365 College View Road  
Eugene, OR 97405**

*certifies that the change in the type design for the following product with the limitations and conditions therefore as specified hereon meets the airworthiness requirements of Part \* of the \* Regulations.*

*Original Product—Type Certificate Number:*

\*See attached FAA Approved Model List (AML)

*Make:*

No. SA00072SE for a list of approved aircraft

*Model:*

models and applicable airworthiness regulations.

*Description of the Type Design Change:* Cockpit sunvisor installation in accordance with FAA approved Rosen Drawing List Number RPF-00DL, Revision C, dated March 3, 2005, or later FAA approved revision.

*Limitations and Conditions:* The approval of this change in type design applies to only those Piper Models listed on FAA AML No. SA00072SE with the following exception. This STC is not valid for Piper PA-28-161 serial number (S/N) 2816110 through 2816119 and after S/N 2842000. This STC is not valid for Piper PA-28-181 S/N 2890206 through 2890231 and after S/N 2843000. This approval should not be extended to other aircraft of this model on which other previously approved modifications are incorporated unless it is determined that the interrelationships between this change and any other previously approved modifications will introduce no adverse effect upon the airworthiness of that aircraft. A copy of this certificate, AML SA00072SE, and FAA approved Rosen Drawing List Number RPF-00DL, Revision C, or later FAA approved revision, shall be maintained as part of the permanent records of the modified aircraft.

If the holder agrees to permit another person to use this certificate to alter the product, the holder shall give the other person written evidence of that permission.

*This certificate and the supporting data which is the basis for approval shall remain in effect until surrendered, suspended, revoked, or a termination date is otherwise established by the Administrator of the Federal Aviation Administration.*

*Date of application:* February 1, 1994

*Date reissued:* March 24, 2003

*Date of issuance:* April 8, 1994

*Date amended:* June 2, 2005



*By direction of the Administrator*

*Don M. Anderson*  
(Signature)

Acting Manager, Seattle Aircraft Certification Office  
(Title)

Any alteration of this certificate is punishable by a fine of not exceeding \$1,000, or imprisonment not exceeding 3 years, or both.

This certificate may be transferred in accordance with FAR 21.47.



**FAA APPROVED MODEL LIST (AML) SA00072SE  
FOR  
INSTALLATION OF ROSEN SUNVISOR SYSTEMS COCKPIT SUN VISOR**

ISSUE DATE: April 4, 1994

ITEM	AIRPLANE MAKE	AIRPLANE MODEL	TYPE CERTIFICATE NUMBER	CERTIFICATION BASIS FOR ALTERATION	FAA APPROVED DRAWING LIST		AML AMENDED
					NUMBER	REVISION NO. AND DATE	DATE
1.	Piper	PA-44-180, PA-44-180T	A19SO	FAR 23	RPF-00DL, Revision C	3/3/05	4/14/05
2.	Piper	PA-28-140, PA-28-150, PA-28-151, PA-28-160, PA-28-161, PA-28-180, PA-28-235, PA-28S-160, PA-28S-180, PA-28R-180, PA-28-181, PA-28R-200, PA-28R-201, PA-28R-201T, PA-28RT-201, PA-28RT-201T, PA-28-201T, PA-28-236	2A13	CAR 3	RPF-00DL, Revision C	3/3/05	4/14/05
3.	Piper	PA-32-260, PA-32-300, PA-32S-300, PA-32R-300, PA-32RT-300, PA-32RT-300T, PA-32R-301, PA-32R-301T, PA-32-301, PA-32-301T	A3SO	CAR 3	RPF-00DL, Revision C	3/3/05	4/14/05
4.	Piper	PA-34-200, PA-34-200T, PA-34-220T	A7SO	FAR 23	RPF-00DL, Revision C	3/3/05	4/14/05

FAA APPROVED:   
Acting Manager, Seattle Aircraft  
Certification Office

REISSUED: April 14, 2005; June 2, 2005  
AMENDED: April 14, 2005



U.S. Department  
Of Transportation  
**Federal  
Aviation**

**MAJOR REPAIR AND ALTERATION**  
(Airframe, Powerplant, Propeller, or Appliance)

Form Approved OMB  
NO.2120-0020

**For FAA Use Only**

Office Identification

INSTRUCTIONS: Print or type all entries. See FAR 43 Appendix B, and AC 43.9-1 (or subsequent revision thereof) for instructions and disposition of this form. This report is required by law (49 U.S.C. 1421). Failure to report can result in a civil penalty not to exceed \$1,000 for each such violation (Section 901 Federal Aviation Act 1958)

1. Aircraft	Make PIPER	Model PA-32-301
	Serial No. 32-8106098	Nationality and Registration Mark N8442H
2. Owner	Name (As shown on registration certificate) Thomas F Hardman LLC.	Address (As shown on registration certificate) 2933 Pionte Dr. Gainesville, Georgia 30506-1765

**3. For FAA Use Only**

4. Unit Identification				5. Type	
Unit	Make	Model	Serial No.	Repair	Alteration
AIRFRAME	~~~~~(As described in item 1 above)~~~~~				X
POWERPLANT					
PROPELLER					
APPLIANCE	Type				
	Manufacturer				

**6. Conformity Statement**

A. Agency's Name and Address	B. Kind of Agency	C. Certificate No.
D & D AVIONICS SERVICES, INC. 2725A HERBERT SMART AIRPORT RD. MACON, GA. 31217	<input type="checkbox"/> U.S. Certificated Mechanic	DXDR595X Radio Class I, II, and III Limited Airframe Limited Instrument
	<input type="checkbox"/> Foreign Certificated Mechanic	
	<input checked="" type="checkbox"/> Certificated Repair Station	
	<input type="checkbox"/> Manufacturer	

D. I certify that the repair and/or alteration made to the unit(s) identified in item 4 above and described on the reverse or attachments hereto have been made in accordance with the requirements of Part 43 of the U.S. Federal Aviation Regulations and that the information furnished herein is true and correct to the best of my knowledge.

Date April 1, 2008	Signature of Authorized Individual  Daniel Smith
-----------------------	--

**7. Approval for Return to Service**

Pursuant to the authority given persons specified below, the unit identified in item 4 was inspected in the manner prescribed by the Administrator of the Federal Aviation Administration and is  APPROVED  REJECTED

BY	<input type="checkbox"/> FAA Flt. Standards Inspector	<input type="checkbox"/> Manufacturer	<input type="checkbox"/> Inspection Authorization	Other (Specify)
	<input type="checkbox"/> FAA Designee	<input checked="" type="checkbox"/> Repair Station	<input type="checkbox"/> Person Approved by Transport Canada Airworthiness Group	
Date of Approval or Rejection April 1, 2008	Certificate or Designation No. DXDR595X	Signature of Authorized Individual 		

## NOTICE

Weight and balance or operating limitation changes shall be entered in the appropriate aircraft record. An alteration must be compatible with all previous alterations to assure continued conformity with the applicable airworthiness requirements.

### 8. Description of Work Accomplished

(If more space is required, attach additional sheets. Identify with aircraft nationality and registration mark and date work completed.)

Piper PA-32-301 S/N 32-8106098      Registration N8442H      Date: April 1, 2008      Page 1 of 1

Validate that the previous installation of the GNS-430 was installed IAW Garmin instructions and approved via an FAA stamped field approval document on FAA Form 337 dated June 9, 2006. Verified this aircraft and all interfaced equipment are covered under STC AML. The unit was removed and upgraded to GNS-430W unit. The existing location of this unit was determined to meet the field of view requirements without the need of external annunciation. The existing wiring and shielding was inspected and determined to be IAW the STC AML installation data. The existing GA-56 GPS antenna was removed and replaced with a GA-35 GPS/WASS antenna using the approved mounting provisions of the previous installation.

A summary of the modification done to the aircraft is as follows.

1. Removed the GA-56 GPS antenna P/N 010-00134-00 and installed a new GA-35 GPS/WASS antenna P/N 013-00235-00 S/N 33770 using the provisions left behind from the standard antenna IAW Garmin upgrade manual P/N 190-00357-06 Rev C and STC number SA01933LA.
2. Removed Garmin GNS-430 P/N 011-00280-10 and installed Garmin GNS-430W P/N 010-01060-40 S/N 97118969, using the provision left behind from the standard GNS-430 unit. Installation done IAW Garmin upgrade manual P/N 190-00357-06 Rev C and STC number SA01933LA.
3. The GNS-430W was configured identical to the original GNS-430 unit. Each interfaced was checked out IAW Garmin GNS400W Series Instalation Manual P/N 190-00356-02 section 5. A copy of of the checkout log was completed and included with the aircraft maintenance records.
4. Removed the aircraft Flight Manual supplement for the GNS-430 and installed a GNS-430 AFMS P/N 190-00356-03, FAA approved date 11/20/2007 into the aircraft flight manual.
5. Updated the aircraft equipment list and Weight and Balance to reflect the new GNS-430W WASS Unit. The current Electrical Load Analysis remains valid since the new unit draws the same or less current than the original unit.

Instructions for Continued Airworthiness (ICA)

1. GNS-430W – Included Garmin Document P/N 190-00356-65, GNS-430W Instructions for Continued Airworthiness in the aircraft maintenance records.

Note: These supercede ICAW data for the previous installed GNS-430.

~~~~~**END**~~~~~

Additional Sheets Are Attached



US Department of Transportation  
Federal Aviation Administration

**MAJOR REPAIR AND ALTERATION**  
(Airframe, Powerplant, Propeller, or Appliance)

Form Approved  
OMB No. 2120-0020  
For FAA Use Only  
Office Identification

INSTRUCTIONS: Print or type all entries. See FAR 43.9, FAR 43 Appendix B, and AC 43.9-1 (or subsequent revision thereof) for instructions and disposition of this form. This report is required by law (49 U.S.C. 1421). Failure to report can result in civil penalty not to exceed \$1,000 for each such violation (Section 901 Federal Aviation Act of 1958).

|             |                                                                             |                                                                                                      |
|-------------|-----------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------|
| 1. Aircraft | Make<br><b>PIPER</b>                                                        | Model<br><b>PA-32-301</b>                                                                            |
|             | Serial No.<br><b>32-8106098</b>                                             | Nationality and Registration Mark<br><b>N8442H</b>                                                   |
| 2. Owner    | Name (As shown on registration certificate)<br><b>THOMAS F. HARDMAN LLC</b> | Address (As shown on registration certificate)<br><b>2933 POINTE DR<br/>GAINESVILLE GA 30506-765</b> |

3. For FAA Use Only

4. Unit Identification

5. Type

| Unit       | Make                           | Model              | Serial No.                    | Repair | Alteration |
|------------|--------------------------------|--------------------|-------------------------------|--------|------------|
| AIRFRAME   | (As described in item 1 above) |                    |                               |        |            |
| POWERPLANT | <b>LYCOMING</b>                | <b>IO-540-K1G5</b> | <b>AL-30652-48A</b>           |        | <b>X</b>   |
| PROPELLER  | <b>Mc CAULEY</b>               | <b>B3D36C433-C</b> | <b>Hub SER. NO<br/>040819</b> |        | <b>X</b>   |
| APPLIANCE  | Type                           |                    |                               |        |            |
|            | Manufacturer                   |                    |                               |        |            |

6. Conformity Statement

|                                                                                                      |                                                                                                                                                                                                                                                |                                         |
|------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------|
| A. Agency's Name and Address<br><b>JOHN HICKMAN<br/>115 AIRPORT RD - SUITE 4<br/>NEWMAN GA 30263</b> | B. Kind of Agency<br><input checked="" type="checkbox"/> U.S. Certificated Mechanic<br><input type="checkbox"/> Foreign Certificated Mechanic<br><input type="checkbox"/> Certificated Repair Station<br><input type="checkbox"/> Manufacturer | C. Certificate No.<br><b>AP 1786035</b> |
|------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------|

D. I certify that the repair and/or alteration made to the unit(s) identified in item 4 above and described on the reverse or attachments hereto have been made in accordance with the requirements of Part 43 of the U.S. Federal Aviation Regulations and that the information furnished herein is true and correct to the best of my knowledge.

|                       |                                        |
|-----------------------|----------------------------------------|
| Date<br><b>1-4-06</b> | Signature of Authorized Individual<br> |
|-----------------------|----------------------------------------|

7. Approval for Return to Service

Pursuant to the authority given persons specified below, the unit identified in item 4 was inspected in the manner prescribed by the Administrator of the Federal Aviation Administration and is  APPROVED  REJECTED

|                                                |                             |                                                  |                                        |                 |
|------------------------------------------------|-----------------------------|--------------------------------------------------|----------------------------------------|-----------------|
| BY                                             | FAA Fit Standards Inspector | Manufacturer                                     | Inspection Authorization               | Other (Specify) |
|                                                | FAA Designee                | Repair Station                                   |                                        |                 |
| Date of Approval or Rejection<br><b>1-4-06</b> |                             | Certificate or Designation No.<br><b>1786035</b> | Signature of Authorized Individual<br> |                 |

NOTICE

Weight and balance or operating limitation changes shall be entered in the appropriate aircraft record. An alteration must be compatible with all previous alterations to assure continued conformity with the applicable airworthiness requirements.

8. Description of Work Accomplished

(If more space is required, attach additional sheets. Identify with aircraft nationality and registration mark and date work completed.)

- ① INSTALLED AIRWOLF NET VACUUM PUMP Pt. No. 3P194 AFC Ser NO. A 00209 AS PER AFE REPORT NO. P100 REV B, MAY 10, 2005 INSTALLATION MANUAL. THIS IS A P.M.A. DIRECT REPLACEMENT FOR DRY VACUUM PUMP. INSTRUCTIONS FOR CONT. AIRWORTHINESS PUMP MUST BE MAINTAINED IAW 43.16 and 91.403
- ② INSTALLED AIRWOLF AIRSEP. AFC-W315 IAW INSTALLATION INSTRUCTIONS AFC-W315 dated 06/08/93 Amended 08/01/02 STC# SA 3839 WE.
- ③ INSTALLED McCAULEY 3-BLADIE PROPELLER B3D36C433-C IAW M.P.S. INSTALLATION INSTRUCTIONS TR863, FEB 24, 1997 STC# SA 433 CH.

— WEIGHT AND BALANCE CALCULATED —

PA32-301 — N8442H — 32-8106098 — TACT 3686.1

END

Additional Sheets Are Attached



**MAJOR REPAIR AND ALTERATION**  
(Airframe, Powerplant, Propeller, or Appliance)

Form Approved  
OMB No. 2120-0020  
For FAA Use Only  
Office Identification  
ATL-FSDO-11 *ETTS*

INSTRUCTIONS: Print or type all entries. See FAR 43.9, FAR 43 Appendix B, and AC 43.9-1 (or subsequent revision thereof) for instructions and disposition of this form. This report is required by law (49 U.S.C. 1421). Failure to report can result in civil penalty not to exceed \$1,000 for each such violation (Section 901 Federal Aviation Act of 1958).

|             |                                                                             |                                                                                                      |
|-------------|-----------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------|
| 1. Aircraft | Make<br><b>PIPER</b>                                                        | Model<br><b>PA-32-301</b>                                                                            |
|             | Serial No.<br><b>32-8106098</b>                                             | Nationality and Registration Mark<br><b>N 8442H</b>                                                  |
| 2. Owner    | Name (As shown on registration certificate)<br><b>THOMAS F. HARDMAN LLC</b> | Address (As shown on registration certificate)<br><b>2933 POINTE DR<br/>GAINSVILLE GA 30506-1765</b> |

**3. For FAA Use Only**

| 4. Unit Identification |                                |       |            | 5. Type |            |
|------------------------|--------------------------------|-------|------------|---------|------------|
| Unit                   | Make                           | Model | Serial No. | Repair  | Alteration |
| AIRFRAME               | (As described in Item 1 above) |       |            |         | X          |
| POWERPLANT             |                                |       |            |         |            |
| PROPELLER              |                                |       |            |         |            |
| APPLIANCE              | Type                           |       |            |         |            |
|                        | Manufacturer                   |       |            |         |            |

**6. Conformity Statement**

|                                                                                                                       |                                                                                                                                                                                                                                                |                                           |
|-----------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------|
| A. Agency's Name and Address<br><b>JOHN HICKMAN<br/>SKYS AIRCRAFT<br/>115 AIRPORT RD. suite 4<br/>NEWNAW GA 30263</b> | B. Kind of Agency<br><input checked="" type="checkbox"/> U.S. Certificated Mechanic<br><input type="checkbox"/> Foreign Certificated Mechanic<br><input type="checkbox"/> Certificated Repair Station<br><input type="checkbox"/> Manufacturer | C. Certificate No.<br><b>AP1786035 IA</b> |
|-----------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------|

I certify that the repair and/or alteration made to the unit(s) identified in item 4 above and described on the reverse or attachments hereto have been made in accordance with the requirements of Part 43 of the Federal Aviation Regulations and that the information furnished herein is true and correct to the best of my knowledge.

|                        |                                                          |
|------------------------|----------------------------------------------------------|
| Date<br><b>1-16-04</b> | Signature of Authorized Individual<br><i>[Signature]</i> |
|------------------------|----------------------------------------------------------|

**7. Approval for Return To Service**

Pursuant to the authority given persons specified below, the unit identified in item 4 was inspected in the manner prescribed by the Administrator of the Federal Aviation Administration and is  APPROVED  REJECTED

|                                                 |                             |                                                       |                                                              |                 |
|-------------------------------------------------|-----------------------------|-------------------------------------------------------|--------------------------------------------------------------|-----------------|
| BY                                              | FAA Ft. Standards Inspector | Manufacturer                                          | <input checked="" type="checkbox"/> Inspection Authorization | Other (Specify) |
|                                                 | FAA Designee                | Repair Station                                        | Person Approved by Transport Canada Airworthiness Group      |                 |
| Date of Approval or Rejection<br><b>1-16-04</b> |                             | Certificate or Designation No.<br><b>AP1786035 IA</b> | Signature of Authorized Individual<br><i>[Signature]</i>     |                 |

**RECEIVED**  
**RECEIVED**  
JAN 26 2004  
GEORGIA FSDO  
ATLANTA, GA

NOTICE

Weight and balance or operating limitation changes shall be entered in the appropriate aircraft record. An alteration must be compatible with all previous alterations to assure continued conformity with the applicable airworthiness requirements.

8. Description of Work Accomplished  
(If more space is required, attach additional sheets. Identify with aircraft nationality and registration mark and date work completed.)

INSTALLED AMERJ-King AK-45 ELT per  
AC 43.13-1B/2A (2A - chapter 2 - page 12 - para 28) and  
INSTALLATION INSTRUCTIONS Per TSO - C91a, RTCA  
DO-1183 and DO-160c Requirements. NO change in  
WEIGHT AND BALANCE -

END

Additional Sheets Are Attached

FAA COPY



US Department of Transportation  
Federal Aviation Administration

**MAJOR REPAIR AND ALTERATION**  
**(Airframe, Powerplant, Propeller, or Appliance)**

Form Approved  
OMB No. 2120-0020

For FAA Use Only

Office Identification

**SO-09/HBP**

INSTRUCTIONS: Print or type all entries. See FAR 43.9, FAR 43 Appendix B, and AC 43.9-1 (or subsequent revision thereof) for instructions and disposition of this form. This report is required by law (49 U.S.C. 1421). Failure to report can result in a civil penalty not to exceed \$1,000 for each such violation (Section 901 Federal Aviation Act of 1958).

|             |                                 |                                                    |
|-------------|---------------------------------|----------------------------------------------------|
| 1. Aircraft | Make<br><b>PIPER</b>            | Model<br><b>PA-32-301</b>                          |
|             | Serial No.<br><b>32-8106098</b> | Nationality and Registration Mark<br><b>N8442H</b> |

|          |                                                                                                                                                                                                                             |                                                                                                           |
|----------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------|
| 2. Owner | Name (As shown on registration certificate)<br><b>F H AVION INC</b>                                                                                                                                                         | Address (As shown on registration certificate)<br><b>2120 16TH SOUTH STE 300<br/>BIRMINGHAM, AL 35205</b> |
|          | The data identified herein complies with the applicable airworthiness requirements and is approved for use on the above described aircraft, subject to conformity inspection by a person authorized in FAR 43, section 121. |                                                                                                           |

**FEB 04 1997**

**HARLEY B. PICKETT**

Date

Signature of FAA Inspector

**4. Unit Identification**

**5. Type**

| Unit       | Make                                       | Model | Serial No. | Repair | Alteration |
|------------|--------------------------------------------|-------|------------|--------|------------|
| AIRFRAME   | ~~~~~ (As described in Item 1 above) ~~~~~ |       |            |        | XXX        |
| POWERPLANT |                                            |       |            |        |            |
| PROPELLER  |                                            |       |            |        |            |
| APPLIANCE  | Type                                       |       |            |        |            |
|            | Manufacturer                               |       |            |        |            |

**6. Conformity Statement**

|                                                                                                                                                                                                                                                                                                                                                    |                                                                 |                                                                 |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------|-----------------------------------------------------------------|
| A. Agency's Name and Address<br><b>AMR COMBS-BHM<br/>4243 EASTLAKE BLVD<br/>BIRMINGHAM, AL 35217</b>                                                                                                                                                                                                                                               | B. Kind of Agency                                               | C. Certificate No.<br><b>RADIO CLASS I<br/>II, III BDTR177K</b> |
|                                                                                                                                                                                                                                                                                                                                                    | <input type="checkbox"/> U.S. Certificated Mechanic             |                                                                 |
|                                                                                                                                                                                                                                                                                                                                                    | <input type="checkbox"/> Foreign Certificated Mechanic          |                                                                 |
|                                                                                                                                                                                                                                                                                                                                                    | <input checked="" type="checkbox"/> Certificated Repair Station |                                                                 |
| D. I certify that the repair and/or alteration made to the unit(s) identified in item 4 above and described on the reverse or attachments hereto have been made in accordance with the requirements of Part 43 of the U.S. Federal Aviation Regulations and that the information furnished herein is true and correct to the best of my knowledge. |                                                                 |                                                                 |

D. I certify that the repair and/or alteration made to the unit(s) identified in item 4 above and described on the reverse or attachments hereto have been made in accordance with the requirements of Part 43 of the U.S. Federal Aviation Regulations and that the information furnished herein is true and correct to the best of my knowledge.

|                         |                                                                    |
|-------------------------|--------------------------------------------------------------------|
| Date<br><b>02-03-97</b> | Signature of Authorized Individual<br><br><b>RICHARD W. CARLEY</b> |
|-------------------------|--------------------------------------------------------------------|

**7. Approval for Return To Service**

Pursuant to the authority given persons specified below, the unit identified in item 4 was inspected in the manner prescribed by the Administrator of the Federal Aviation Administration and is  APPROVED  REJECTED

|    |                                                  |                |                                                         |                 |
|----|--------------------------------------------------|----------------|---------------------------------------------------------|-----------------|
| BY | FAA Fit. Standards Inspector                     | Manufacturer   | Inspection Authorization                                | Other (Specify) |
|    | FAA Designee <input checked="" type="checkbox"/> | Repair Station | Person Approved by Transport Canada Airworthiness Group |                 |

|                                                  |                                                   |                                                                    |
|--------------------------------------------------|---------------------------------------------------|--------------------------------------------------------------------|
| Date of Approval or Rejection<br><b>02-04-97</b> | Certificate or Designation No.<br><b>BDTR177K</b> | Signature of Authorized Individual<br><br><b>Richard W. Carley</b> |
|--------------------------------------------------|---------------------------------------------------|--------------------------------------------------------------------|



**NOTICE**

Weight and balance or operating limitation changes shall be entered in the appropriate aircraft record. An alteration must be compatible with all previous alterations to assure continued conformity with the applicable airworthiness requirements.

**8. Description of Work Accomplished**

(If more space is required, attach additional sheets. Identify with aircraft nationality and registration mark and date work completed.)

REMOVED THE FOLLING EQUIPMENT:  
APOLLO 618

INSTALLED THE FOLLING EQUIPMENT:

BENDIX KING KLN 89B GPS NAV  
MD-41 SWITCHING UNIT  
BENDIX KING KA92 GPS ANTENNA

THE APOLLO SYSTEM WAS REMOVED TO INSTALL A BENDIX KING KLN 89B. EXISTING CIRCUIT BREAKER WAS USED FOR THE KLN89B BUT A GPS ANTENNA WAS INSTALLED TO COMPLETE THE SYSTEM INSTALLATION. ALSO ADDITIONAL MD-41 WERE ADDED FOR ADDITIONAL FEATURES.

THE KLN 89B WAS INSTALLED AS AN IFR APPROVED ENROUTE, TERMINAL, AND APPROACH NAVIGATION SYSTEM IN THE CENTER CONSOLE RACK. TEST FLIGHT ACCOMPLISHED AND CERTIFIED BY JOHN O. HOLLAND.

ALL WIRING USED IS MIL SPEC TEFZEL COATED. ALL EQUIPMENT IS INSTALLED IN ACCORDANCE WITH BENDIX KING KLN89B INSTALL MANUAL 006-10522-0001 REV 1, JUNE 1995; THE SYSTEM WAS FUNCTIONALLY TESTED FOR OPERATION, INTEGRATION AND INTERFERENCE WITH EXISTING EQUIPMENT AND FOUND SATISFACTORY. FLIGHT MANUAL SUPPLEMENT IS FAA APPROVED AND A COPY PROVIDED TO THE AIRCRAFT OWNER/OPERATOR. LOG BOOK ENTRY WAS MADE. WEIGHT AND BALANCE RECOMPUTED AND EQUIPMENT LIST WAS REVISED TO REFLECT INSTALLATION. AC20-138 WAS USED FOR APPROVED DATA.

\*\*\*\*\*

Additional Sheets Are Attached

GLS  
RECEIVED

FAA

|                                                                                                                                                                                     |                                                                                                     |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------|
| <b>FEB 28 1996</b><br>US Department of Transportation<br>Federal Aviation Administration<br><b>ALABAMA (Airframe, Powerplant, Propeller, or Appliance)</b><br>ALABAMA FSDO<br>80-09 | Form Approved<br>OMB No. 2120-0020<br>For FAA Use Only<br>Office Identification<br><b>SO-09/HBP</b> |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------|

INSTRUCTIONS: Print or type all entries. See FAR 43.9, FAR 43 Appendix B, and AC 43.9-1 (or subsequent revision thereof) for instructions and disposition of this form. This report is required by law (49 U.S.C. 1421). Failure to report can result in a civil penalty not to exceed \$1,000 for each such violation (Section 901 Federal Aviation Act of 1958).

|             |                                                                     |                                                                                                           |
|-------------|---------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------|
| 1. Aircraft | Make<br><b>PIPER</b>                                                | Model<br><b>PA-32-301</b>                                                                                 |
|             | Serial No.<br><b>32-8106098</b>                                     | Nationality and Registration Mark<br><b>N8442H</b>                                                        |
| 2. Owner    | Name (As shown on registration certificate)<br><b>F H AVION INC</b> | Address (As shown on registration certificate)<br><b>2120 16TH SOUTH STE 300<br/>BIRMINGHAM, AL 35205</b> |

**3. For FAA Use Only**

**4. Unit Identification**

**5. Type**

| Unit       | Make                                       | Model | Serial No. | Repair | Alteration |
|------------|--------------------------------------------|-------|------------|--------|------------|
| AIRFRAME   | ~~~~~ (As described in Item 1 above) ~~~~~ |       |            |        | XXX        |
| POWERPLANT |                                            |       |            |        |            |
| PROPELLER  |                                            |       |            |        |            |
| APPLIANCE  | Type                                       |       |            |        |            |
|            | Manufacturer                               |       |            |        |            |

**6. Conformity Statement**

|                                                                                         |                                                                |                     |
|-----------------------------------------------------------------------------------------|----------------------------------------------------------------|---------------------|
| A. Agency's Name and Address                                                            | B. Kind of Agency                                              | C. Certificate No.  |
| <del>FAA - Central District</del><br><b>2243 EASTLAKE BLVD<br/>BIRMINGHAM, AL 35217</b> | U.S. Certified Mechanic                                        | <b>CRS BDTR177K</b> |
|                                                                                         | <input checked="" type="checkbox"/> Foreign Certified Mechanic |                     |
|                                                                                         | <input checked="" type="checkbox"/> Certified Repair Station   |                     |
|                                                                                         | Manufacturer                                                   |                     |

D. I certify that the repair and/or alteration made to the unit(s) identified in item 4 above and described on the reverse or attachments hereto have been made in accordance with the requirements of Part 43 of the U.S. Federal Aviation Regulations and that the information furnished herein is true and correct to the best of my knowledge.

|                         |                                                                  |
|-------------------------|------------------------------------------------------------------|
| Date<br><b>02-26-96</b> | Signature of Authorized Individual<br><br><b>D. ALLEN HUDSON</b> |
|-------------------------|------------------------------------------------------------------|

**7. Approval for Return To Service**

Pursuant to the authority given persons specified below, the unit identified in item 4 was inspected in the manner prescribed by the Administrator of the Federal Aviation Administration and is  APPROVED  REJECTED

|                                                 |                              |                                                       |                                                                  |                 |
|-------------------------------------------------|------------------------------|-------------------------------------------------------|------------------------------------------------------------------|-----------------|
| BY                                              | FAA Fit. Standards Inspector | Manufacturer                                          | Inspection Authorization                                         | Other (Specify) |
|                                                 | FAA Designee                 | <input checked="" type="checkbox"/> Repair Station    | Person Approved by Transport Canada Airworthiness Group          |                 |
| Date of Approval or Rejection<br><b>2-26-96</b> |                              | Certificate or Designation No.<br><b>CRS BDTR177K</b> | Signature of Authorized Individual<br><br><b>D. Allen Hudson</b> |                 |

NOTICE

Weight and balance or operating limitation changes shall be entered in the appropriate aircraft record. An alteration must be compatible with all previous alterations to assure continued conformity with the applicable airworthiness requirements.

8. Description of Work Accomplished

(If more space is required, attach additional sheets. Identify with aircraft nationality and registration mark and date work completed.)

\*\*\*\*\*INSTALLATION OF GEM-610 GRAPHIC ENGINE MONITOR\*\*\*\*\*

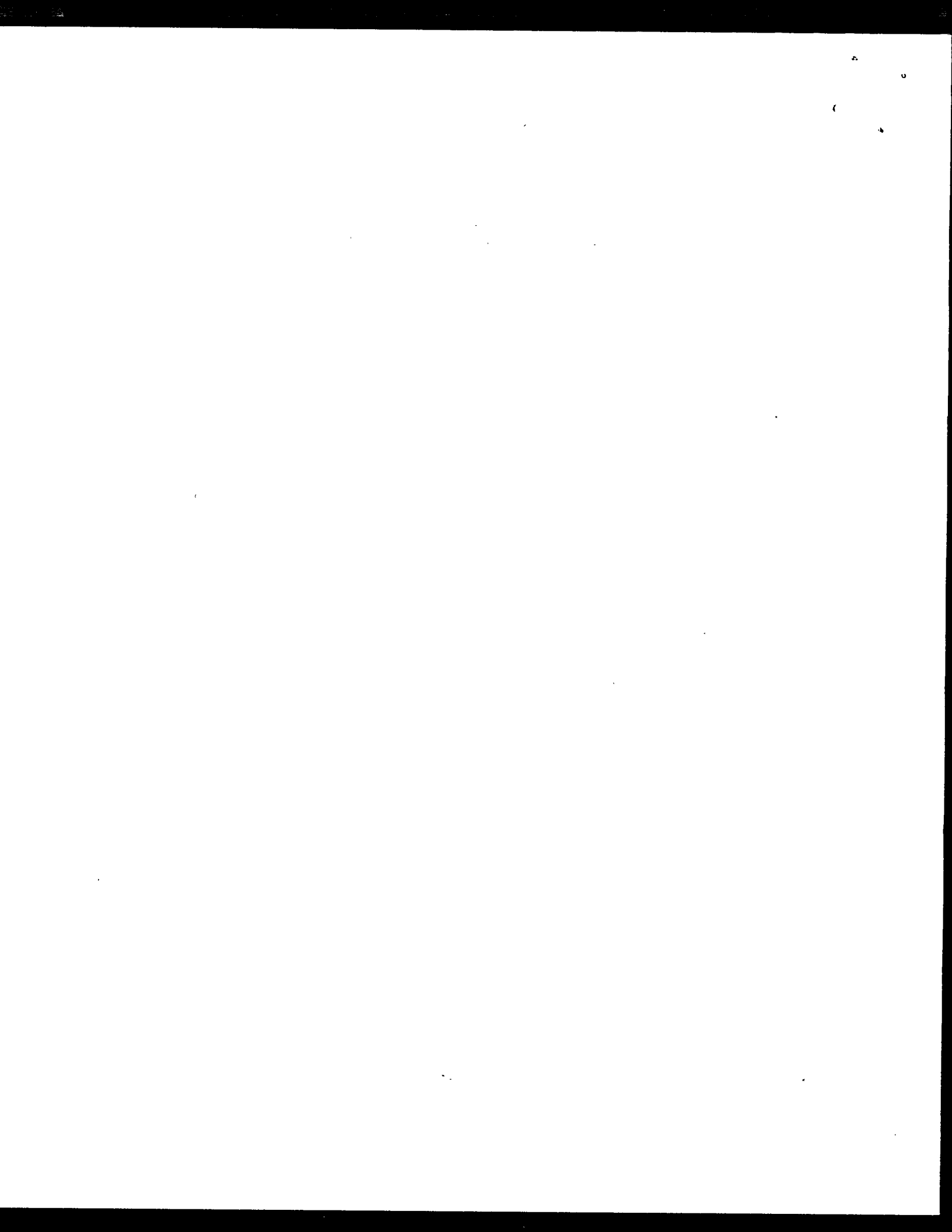
THE FOLLOWING COMPONENTS WERE INSTALLED:

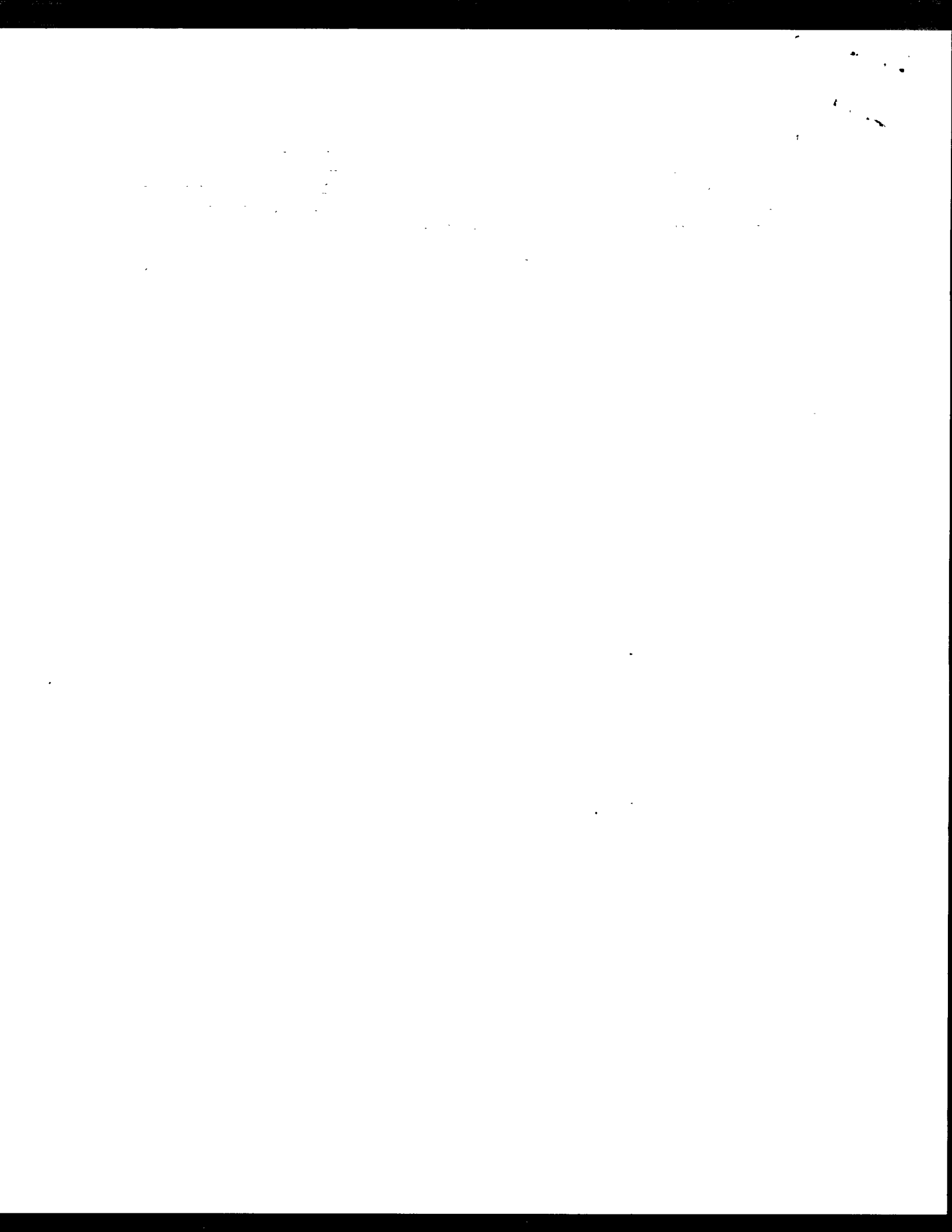
- 1. 6-EACH INSIGHT INSTRUMENT CYLINDER HEAD TEMPERATURE PROBES P/N 2852
- 2. 6-EACH INSIGHT INSTRUMENT EXHAUST GAS TEMPERATURE PROBES P/N 2870
- 3. 6-EACH INSIGHT INSTRUMENT CYLINDER HEAD TEMPERATURE HARNESSSES
- 4. 6-EACH INSIGHT INSTRUMENT EXHAUST GAS TEMPERATURE HARNESSSES
- 5. 1-EACH DISPLAY P/N 610-001 AND COMPUTER P/N 40200LX

THE MODIFICATION TO THE AIRCRAFT WAS PERFORMED IN REFERENCE TO STC NUMBER SA157NE; ISSUED 06-04-83 AS AMENDED THROUGH 10-11-89. NEITHER MODEL 602 NOR MODEL 603 GRAPHIC ENGINE MONITOR WAS INSTALLED WHICH REPRESENTS A DEVIATION TO STC NUMBER SA157NE. SEE THE ATTACHED LETTER FROM THE NEW YORK AIRCRAFT CERTIFICATION OFFICE, DATED 08-24-93 ACCEPTING THE TSO GAGE GEM-610. ALL COMPONENTS WERE INSTALLED, WIRED AND SECURED IN ACCORDANCE WITH INSTRUCTIONS PROVIDED WITHIN INSIGHT INSTRUMENT CORPORATION INSTALLATION MANUALS, DWG 8258, VERSION 2.1 AND DOCUMENT NO. 930320, REVISION 1.02. THE COMPONENTS, AS INSTALLED, COMPLY WITH THE REQUIREMENTS OF FAR(s) 23.1121 (b) & (c), 23.1301, AND 23.1309 (a) & (b) (1) & (2). THE ALTERATION WAS PERFORMED IN ACCORDANCE WITH AC 43.13-1A, CHAPTER 11, PARAGRAPHS 446 THROUGH 448, 450, 451, 464 THROUGH 466, 514 THROUGH 518 AND AC 43.13-2A, CHAPTER 13. THE AIRCRAFT WEIGHT AND BALANCE, AND THE EQUIPMENT LIST WERE AMENDED IN ACCORDANCE WITH AC 43.13-1A, CHAPTER 13, PARAGRAPHS 659 THROUGH 663. ALL INSPECTION RECORDS AND OTHER DOCUMENTS PERTAINING TO THIS MAJOR ALTERATION ARE ON FILE AT REPAIR STATION BDTR177K UNDER WORK ORDER 12245.


\*\*\*\*\*END\*\*\*\*\*

Additional Sheets Are Attached





FAA

|                                                                                                                                                                                                                                                                                                                                                                    |                                                                |                                                                                                                                                                                                                           |                                                                                                       |                                                                                                     |            |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------|------------|
| <br>U.S. Department of Transportation<br>Federal Aviation Administration                                                                                                                                                                                                          |                                                                | <b>MAJOR REPAIR AND ALTERATION</b><br>(Airframe, Powerplant, Propeller, or Appliance)                                                                                                                                     |                                                                                                       | Form Approved<br>OMB No. 2120-0020<br>For FAA Use Only<br>Office Identification<br><b>SO-09/MHM</b> |            |
| INSTRUCTIONS: Print or type all entries. See FAR 43.9, FAR 43 Appendix B, and AC 43.9-1 (or subsequent revision thereof) for instructions and disposition of this form. This report is required by law (49 U.S.C. 1421). Failure to report can result in a civil penalty not to exceed \$1,000 for each such violation (Section 901 Federal Aviation Act of 1958). |                                                                |                                                                                                                                                                                                                           |                                                                                                       |                                                                                                     |            |
| 1. Aircraft                                                                                                                                                                                                                                                                                                                                                        | Make<br>PIPER                                                  |                                                                                                                                                                                                                           | Model<br>PA-32-301                                                                                    |                                                                                                     |            |
|                                                                                                                                                                                                                                                                                                                                                                    | Serial No.<br>32-8106098                                       |                                                                                                                                                                                                                           | Nationality and Registration Mark<br>N8442H                                                           |                                                                                                     |            |
| 2. Owner                                                                                                                                                                                                                                                                                                                                                           | Name (As shown on registration certificate)<br>F H AVION, INC. |                                                                                                                                                                                                                           | Address (As shown on registration certificate)<br>2120 16TH AVE SOUTH STE 300<br>BIRMINGHAM, AL 35205 |                                                                                                     |            |
|                                                                                                                                                                                                                                                                                                                                                                    | 3. For FAA Use Only                                            |                                                                                                                                                                                                                           |                                                                                                       |                                                                                                     |            |
| 4. Unit Identification                                                                                                                                                                                                                                                                                                                                             |                                                                |                                                                                                                                                                                                                           |                                                                                                       |                                                                                                     |            |
| Unit                                                                                                                                                                                                                                                                                                                                                               | Make                                                           | Model                                                                                                                                                                                                                     | Serial No.                                                                                            | Repair                                                                                              | Alteration |
| AIRFRAME                                                                                                                                                                                                                                                                                                                                                           | (As described in Item 1 above)                                 |                                                                                                                                                                                                                           |                                                                                                       |                                                                                                     | XXX        |
| POWERPLANT                                                                                                                                                                                                                                                                                                                                                         |                                                                |                                                                                                                                                                                                                           |                                                                                                       |                                                                                                     |            |
| PROPELLER                                                                                                                                                                                                                                                                                                                                                          |                                                                |                                                                                                                                                                                                                           |                                                                                                       |                                                                                                     |            |
| APPLIANCE                                                                                                                                                                                                                                                                                                                                                          | Type                                                           |                                                                                                                                                                                                                           |                                                                                                       |                                                                                                     |            |
|                                                                                                                                                                                                                                                                                                                                                                    | Manufacturer                                                   |                                                                                                                                                                                                                           |                                                                                                       |                                                                                                     |            |
| 6. Conformity Statement                                                                                                                                                                                                                                                                                                                                            |                                                                |                                                                                                                                                                                                                           |                                                                                                       |                                                                                                     |            |
| A. Agency's Name and Address                                                                                                                                                                                                                                                                                                                                       |                                                                | B. Kind of Agency                                                                                                                                                                                                         |                                                                                                       | C. Certificate No.                                                                                  |            |
| AMR COMBS<br>4243 EAST LAKE BLVD.<br>BIRMINGHAM, AL 35217                                                                                                                                                                                                                                                                                                          |                                                                | <input type="checkbox"/> U.S. Certificated Mechanic<br><input type="checkbox"/> Foreign Certificated Mechanic<br><input checked="" type="checkbox"/> Certificated Repair Station<br><input type="checkbox"/> Manufacturer |                                                                                                       | CLASS III<br>BDTR177K                                                                               |            |
| D. I certify that the repair and/or alteration made to the unit(s) identified in item 4 above and described on the reverse or attachments hereto have been made in accordance with the requirements of Part 43 of the U.S. Federal Aviation Regulations and that the information furnished herein is true and correct to the best of my knowledge.                 |                                                                |                                                                                                                                                                                                                           |                                                                                                       |                                                                                                     |            |
| Date<br>02/14/95                                                                                                                                                                                                                                                                                                                                                   |                                                                | Signature of Authorized Individual<br><i>Richard W. Carley</i><br>RICHARD W. CARLEY                                                                                                                                       |                                                                                                       |                                                                                                     |            |
| 7. Approval for Return To Service                                                                                                                                                                                                                                                                                                                                  |                                                                |                                                                                                                                                                                                                           |                                                                                                       |                                                                                                     |            |
| Pursuant to the authority given persons specified below, the unit identified in item 4 was inspected in the manner prescribed by the Administrator of the Federal Aviation Administration and is <input checked="" type="checkbox"/> APPROVED <input type="checkbox"/> REJECTED                                                                                    |                                                                |                                                                                                                                                                                                                           |                                                                                                       |                                                                                                     |            |
| BY                                                                                                                                                                                                                                                                                                                                                                 | FAA Flt. Standards Inspector                                   | Manufacturer                                                                                                                                                                                                              | Inspection Authorization                                                                              | Other (Specify)                                                                                     |            |
|                                                                                                                                                                                                                                                                                                                                                                    | FAA Designee                                                   | <input checked="" type="checkbox"/> Repair Station                                                                                                                                                                        | Person Approved by Transport Canada Airworthiness Group                                               |                                                                                                     |            |
| Date of Approval or Rejection<br>02/14/95                                                                                                                                                                                                                                                                                                                          |                                                                | Certificate or Designation No.<br>BDTR177K                                                                                                                                                                                | Signature of Authorized Individual<br><i>Richard W. Carley</i><br>RICHARD W. CARLEY                   |                                                                                                     |            |

NOTICE

Weight and balance or operating limitation changes shall be entered in the appropriate aircraft record. An alteration must be compatible with all previous alterations to assure continued conformity with the applicable airworthiness requirements.

8. Description of Work Accomplished  
(If more space is required, attach additional sheets. Identify with aircraft nationality and registration mark and date work completed.)

INSTALLATION OF PRECISE LANDING/TAXI RECOG LITES KIT,  
RMD AIRCRAFT LIGHTING WING TIPS KIT AND LAMINAR FLOW  
SYSTEMS SPEED ENHANCEMENT KIT

1. INSTALLED PRECISE PULSELITE MODEL 1210/2405A AS PER  
STC SA4005NM, DATED 08-19-88
2. INSTALLED R.D.M. AIRCRAFT LIGHTING, INC LANDING/  
RECOGNITION LIGHTS KIT AS PER STC SA2356NM, DATED  
03-06-84
3. INSTALLED LAMINER FLOW SYSTEM, INC SPEED ENHANCEMENT  
KIT AS PER STC SA1486SO, DATED 07-29-83 TO THE FLAP  
SYSTEM

AIRCRAFT EQUIPMENT LIST AND WEIGHT & BALANCE AMENDED  
TO REFLECT THE ABOVE MODIFICATIONS

\*\*\*\*\*END\*\*\*\*\*END\*\*\*\*\*END\*\*\*\*\*

Additional Sheets Are Attached

F.A.A.

6 MAR 1989

|                                                                                                                                                                                                                                                                                                                                                    |                                             |                                |                                                                 |                                                                                                                       |                    |  |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------|--------------------------------|-----------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------|--------------------|--|
| U.S. DEPARTMENT OF TRANSPORTATION<br>FEDERAL AVIATION ADMINISTRATION<br><b>MAJOR REPAIR AND ALTERATION</b><br>(Airframe, Powerplant, Propeller, or Appliance)                                                                                                                                                                                      |                                             |                                |                                                                 | Form Approved<br>Budget Bureau No. 04-R000.1<br><b>FOR FAA USE ONLY</b><br>OFFICE IDENTIFICATION<br><b>SO FSDO-09</b> |                    |  |
| INSTRUCTIONS: Print or type all entries. See FAR 43.9, FAR 43 Appendix B, and AC 43.9-1 (or subsequent revision thereof) for instructions and disposition of this form.                                                                                                                                                                            |                                             |                                |                                                                 |                                                                                                                       |                    |  |
| 1. AIRCRAFT                                                                                                                                                                                                                                                                                                                                        | MAKE                                        | Piper                          |                                                                 | MODEL                                                                                                                 | PA32-301           |  |
|                                                                                                                                                                                                                                                                                                                                                    | SERIAL NO.                                  | 32-8106098                     |                                                                 | NATIONALITY AND REGISTRATION MARK                                                                                     | N8442H             |  |
| 2. OWNER                                                                                                                                                                                                                                                                                                                                           | NAME (As shown on registration certificate) |                                |                                                                 | ADDRESS (As shown on registration certificate)                                                                        |                    |  |
|                                                                                                                                                                                                                                                                                                                                                    | Harvey C. Slocum, Jr.                       |                                |                                                                 | 307 Forrest Lane<br>Jasper, AL 35501                                                                                  |                    |  |
| 3. FOR FAA USE ONLY                                                                                                                                                                                                                                                                                                                                |                                             |                                |                                                                 |                                                                                                                       |                    |  |
| 4. UNIT IDENTIFICATION                                                                                                                                                                                                                                                                                                                             |                                             |                                |                                                                 |                                                                                                                       | 5. TYPE            |  |
| UNIT                                                                                                                                                                                                                                                                                                                                               | MAKE                                        | MODEL                          | SERIAL NO.                                                      | REPAIR                                                                                                                | ALTERATION         |  |
| AIRFRAME                                                                                                                                                                                                                                                                                                                                           | ..... (As described in item 1 above) .....  |                                |                                                                 |                                                                                                                       | XXX                |  |
| POWERPLANT                                                                                                                                                                                                                                                                                                                                         |                                             |                                |                                                                 |                                                                                                                       |                    |  |
| PROPELLER                                                                                                                                                                                                                                                                                                                                          |                                             |                                |                                                                 |                                                                                                                       |                    |  |
| APPLIANCE                                                                                                                                                                                                                                                                                                                                          | TYPE                                        |                                |                                                                 |                                                                                                                       |                    |  |
|                                                                                                                                                                                                                                                                                                                                                    | MANUFACTURER                                |                                |                                                                 |                                                                                                                       |                    |  |
| 6. CONFORMITY STATEMENT                                                                                                                                                                                                                                                                                                                            |                                             |                                |                                                                 |                                                                                                                       |                    |  |
| A. AGENCY'S NAME AND ADDRESS                                                                                                                                                                                                                                                                                                                       |                                             |                                | B. KIND OF AGENCY                                               |                                                                                                                       | C. CERTIFICATE NO. |  |
| Hangar One, Inc.<br>P.O. Box 320159<br>Birmingham, AL 35232                                                                                                                                                                                                                                                                                        |                                             |                                | U.S. CERTIFICATED MECHANIC                                      |                                                                                                                       | RS702-4            |  |
|                                                                                                                                                                                                                                                                                                                                                    |                                             |                                | FOREIGN CERTIFICATED MECHANIC                                   |                                                                                                                       |                    |  |
|                                                                                                                                                                                                                                                                                                                                                    |                                             |                                | <input checked="" type="checkbox"/> CERTIFICATED REPAIR STATION |                                                                                                                       |                    |  |
|                                                                                                                                                                                                                                                                                                                                                    |                                             |                                | MANUFACTURER                                                    |                                                                                                                       |                    |  |
| D. I certify that the repair and/or alteration made to the unit(s) identified in item 4 above and described on the reverse or attachments hereto have been made in accordance with the requirements of Part 43 of the U.S. Federal Aviation Regulations and that the information furnished herein is true and correct to the best of my knowledge. |                                             |                                |                                                                 |                                                                                                                       |                    |  |
| DATE                                                                                                                                                                                                                                                                                                                                               |                                             |                                | SIGNATURE OF AUTHORIZED INDIVIDUAL                              |                                                                                                                       |                    |  |
| March 2, 1989                                                                                                                                                                                                                                                                                                                                      |                                             |                                |                                                                 |                                                                                                                       |                    |  |
| 7. APPROVAL FOR RETURN TO SERVICE                                                                                                                                                                                                                                                                                                                  |                                             |                                |                                                                 |                                                                                                                       |                    |  |
| Pursuant to the authority given persons specified below, the unit identified in item 4 was inspected in the manner prescribed by the Administrator of the Federal Aviation Administration and is: <input checked="" type="checkbox"/> APPROVED <input type="checkbox"/> REJECTED                                                                   |                                             |                                |                                                                 |                                                                                                                       |                    |  |
| BY                                                                                                                                                                                                                                                                                                                                                 | FAA FLT. STANDARDS INSPECTOR                | MANUFACTURER                   | INSPECTION AUTHORIZATION                                        | OTHER (Specify)                                                                                                       |                    |  |
|                                                                                                                                                                                                                                                                                                                                                    | FAA DESIGNEE                                | REPAIR STATION                 | CANADIAN DEPARTMENT OF TRANSPORT INSPECTOR OF AIRCRAFT          |                                                                                                                       |                    |  |
| DATE OF APPROVAL OR REJECTION                                                                                                                                                                                                                                                                                                                      |                                             | CERTIFICATE OR DESIGNATION NO. | SIGNATURE OF AUTHORIZED INDIVIDUAL                              |                                                                                                                       |                    |  |
| March 2, 1989                                                                                                                                                                                                                                                                                                                                      |                                             | RS702-4                        |                                                                 |                                                                                                                       |                    |  |



**NOTICE**

Weight and balance or operating limitation changes shall be entered in the appropriate aircraft record. An alteration must be compatible with all previous alterations to assure continued conformity with the applicable airworthiness requirements.

**8. DESCRIPTION OF WORK ACCOMPLISHED (If more space is required, attach additional sheets. Identify with aircraft nationality and registration mark and date work completed.)**

Removed #1 NAV/GS Receiver KN53 and KI204 Indicator and Directional Gyro 52D254.

Installed King-KCS55A, II Morrow 618TCA Loran C and 3M Stormscope WX10A Weather Mapping System as follows: King KCS55A Compass/HSI System was installed in accordance with King Install Manual 006-0111-05 and Recommendations of AC43.13-2A, Chapters 1, 2 & 3. Compass system was calibrated to meet the accuracy required by the manufacturer. King KNS80 RNAV/DME system was installed in accordance with King Install Manual 006-0154-00 and Recommendations of AC43.13-2A, Chapters 1, 2 & 3. A placard stating "RNAV To Be Used For VFR Only" was installed and is to stay in place until IFR approval is obtained for the system. The VOR/DME mode of this system meet all requirements for IFR at this time. II Morrow 618TCA Loran C was installed in accordance with II Morrow Install Manual 560-0023A Rev. 04 and Recommendations of AC43.13-2A, Chapters 1, 2 & 3. The Loran C installation is a stand alone system and is placarded "Loran System To Be Used For VFR Only." 3M Stormscope WX10A Weather Mapping System was installed in accordance with 3M Stormscope Manual 78-8041-7921-2 and Recommendations of AC43.13-2A, Chapters 1, 2 & 3. All equipment function checked and flight check, ok. Weight and Balance Data and Equipment List were revised.

-----END-----

FAA Form 337 (Rev. 11-19-70) - Aircraft Repair and Maintenance Record

|                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
|---------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| NO. OF SHEETS       | 1                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
| DATE                | 1-12-91                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |
| WORK ORDER NO.      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| DESCRIPTION OF WORK | Removed #1 NAV/GS Receiver KN53 and KI204 Indicator and Directional Gyro 52D254. Installed King-KCS55A, II Morrow 618TCA Loran C and 3M Stormscope WX10A Weather Mapping System as follows: King KCS55A Compass/HSI System was installed in accordance with King Install Manual 006-0111-05 and Recommendations of AC43.13-2A, Chapters 1, 2 & 3. Compass system was calibrated to meet the accuracy required by the manufacturer. King KNS80 RNAV/DME system was installed in accordance with King Install Manual 006-0154-00 and Recommendations of AC43.13-2A, Chapters 1, 2 & 3. A placard stating "RNAV To Be Used For VFR Only" was installed and is to stay in place until IFR approval is obtained for the system. The VOR/DME mode of this system meet all requirements for IFR at this time. II Morrow 618TCA Loran C was installed in accordance with II Morrow Install Manual 560-0023A Rev. 04 and Recommendations of AC43.13-2A, Chapters 1, 2 & 3. The Loran C installation is a stand alone system and is placarded "Loran System To Be Used For VFR Only." 3M Stormscope WX10A Weather Mapping System was installed in accordance with 3M Stormscope Manual 78-8041-7921-2 and Recommendations of AC43.13-2A, Chapters 1, 2 & 3. All equipment function checked and flight check, ok. Weight and Balance Data and Equipment List were revised. |
| APPROVED            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| DATE                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| WORK ORDER NO.      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| DESCRIPTION OF WORK |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| APPROVED            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| DATE                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |

2042DC 00

ADDITIONAL SHEETS ARE ATTACHED

58

| DEPARTMENT OF TRANSPORTATION<br>FEDERAL AVIATION ADMINISTRATION                                                                                                                                                                                                                                                                                    |                                             |                                                                                                                                                                                                                           |                                     | Form Approved<br>Budget Bureau No. 04-R060.1           |                 |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------------------------------------|-----------------|
| MAJOR REPAIR AND ALTERATION<br>(Airframe, Powerplant, Propeller, or Appliance)                                                                                                                                                                                                                                                                     |                                             |                                                                                                                                                                                                                           |                                     | FOR FAA USE ONLY                                       |                 |
|                                                                                                                                                                                                                                                                                                                                                    |                                             |                                                                                                                                                                                                                           |                                     | OFFICE IDENTIFICATION<br>LAGL-GADO-10                  |                 |
| INSTRUCTIONS: Print or type all entries. See FAR 43.9, FAR 43 Appendix B, and AC 43.9-1 (or subsequent revision thereof) for instructions and disposition of this form.                                                                                                                                                                            |                                             |                                                                                                                                                                                                                           |                                     |                                                        |                 |
| 1. AIRCRAFT                                                                                                                                                                                                                                                                                                                                        | MAKE                                        | Piper                                                                                                                                                                                                                     |                                     | MODEL                                                  | PA32-301        |
|                                                                                                                                                                                                                                                                                                                                                    | SERIAL NO.                                  | 32-8106098                                                                                                                                                                                                                |                                     | NATIONALITY AND REGISTRATION MARK                      | N 8442H         |
| 2. OWNER                                                                                                                                                                                                                                                                                                                                           | NAME (As shown on registration certificate) |                                                                                                                                                                                                                           |                                     | ADDRESS (As shown on registration certificate)         |                 |
|                                                                                                                                                                                                                                                                                                                                                    | Muncie Datsun Inc.                          |                                                                                                                                                                                                                           |                                     | 4411 North Broadway<br>Muncie, In 47305                |                 |
| 3. FOR FAA USE ONLY                                                                                                                                                                                                                                                                                                                                |                                             |                                                                                                                                                                                                                           |                                     |                                                        |                 |
| 4. UNIT IDENTIFICATION                                                                                                                                                                                                                                                                                                                             |                                             |                                                                                                                                                                                                                           |                                     |                                                        |                 |
| UNIT                                                                                                                                                                                                                                                                                                                                               | MAKE                                        | MODEL                                                                                                                                                                                                                     | SERIAL NO.                          | REPAIR                                                 | ALTERATION      |
| AIRFRAME                                                                                                                                                                                                                                                                                                                                           | ***** (As described in item 1 above) *****  |                                                                                                                                                                                                                           |                                     |                                                        | XX              |
| POWERPLANT                                                                                                                                                                                                                                                                                                                                         | Lycoming                                    | IO-540-K1G5                                                                                                                                                                                                               | L-21408-48A                         |                                                        | XX              |
| PROPELLER                                                                                                                                                                                                                                                                                                                                          |                                             |                                                                                                                                                                                                                           |                                     |                                                        |                 |
| APPLIANCE                                                                                                                                                                                                                                                                                                                                          | TYPE                                        |                                                                                                                                                                                                                           |                                     |                                                        |                 |
|                                                                                                                                                                                                                                                                                                                                                    | MANUFACTURER                                |                                                                                                                                                                                                                           |                                     |                                                        |                 |
| 6. CONFORMITY STATEMENT                                                                                                                                                                                                                                                                                                                            |                                             |                                                                                                                                                                                                                           |                                     |                                                        |                 |
| A. AGENCY'S NAME AND ADDRESS                                                                                                                                                                                                                                                                                                                       |                                             | B. KIND OF AGENCY                                                                                                                                                                                                         |                                     | C. CERTIFICATE NO.                                     |                 |
| AIR MARION INC<br>Michael J Glick                                                                                                                                                                                                                                                                                                                  |                                             | <input checked="" type="checkbox"/> U.S. CERTIFICATED MECHANIC<br><input type="checkbox"/> FOREIGN CERTIFICATED MECHANIC<br><input type="checkbox"/> CERTIFICATED REPAIR STATION<br><input type="checkbox"/> MANUFACTURER |                                     | A&P 1743242IA                                          |                 |
| D. I certify that the repair and/or alteration made to the unit(s) identified in item 4 above and described on the reverse or attachments hereto have been made in accordance with the requirements of Part 43 of the U.S. Federal Aviation Regulations and that the information furnished herein is true and correct to the best of my knowledge. |                                             |                                                                                                                                                                                                                           |                                     |                                                        |                 |
| DATE                                                                                                                                                                                                                                                                                                                                               | SIGNATURE OF AUTHORIZED INDIVIDUAL          |                                                                                                                                                                                                                           |                                     |                                                        |                 |
| 01-06-87                                                                                                                                                                                                                                                                                                                                           | Michael J Glick                             |                                                                                                                                                                                                                           |                                     |                                                        |                 |
| 7. APPROVAL FOR RETURN TO SERVICE                                                                                                                                                                                                                                                                                                                  |                                             |                                                                                                                                                                                                                           |                                     |                                                        |                 |
| Pursuant to the authority given persons specified below, the unit identified in item 4 was inspected in the manner prescribed by the Administrator of the Federal Aviation Administration and is <input checked="" type="checkbox"/> APPROVED <input type="checkbox"/> REJECTED                                                                    |                                             |                                                                                                                                                                                                                           |                                     |                                                        |                 |
| BY                                                                                                                                                                                                                                                                                                                                                 | FAA RT. STANDARDS INSPECTOR                 | MANUFACTURER                                                                                                                                                                                                              | <input checked="" type="checkbox"/> | INSPECTION AUTHORIZATION                               | OTHER (Specify) |
|                                                                                                                                                                                                                                                                                                                                                    | FAA DESIGNEE                                | REPAIR STATION                                                                                                                                                                                                            |                                     | CANADIAN DEPARTMENT OF TRANSPORT INSPECTOR OF AIRCRAFT |                 |
| DATE OF APPROVAL OR REJECTION                                                                                                                                                                                                                                                                                                                      | CERTIFICATE OR DESIGNATION NO.              | SIGNATURE OF AUTHORIZED INDIVIDUAL                                                                                                                                                                                        |                                     |                                                        |                 |
| 01-06-87                                                                                                                                                                                                                                                                                                                                           | 1743242 IA                                  | Michael J Glick                                                                                                                                                                                                           |                                     |                                                        |                 |