



United States of America
Department of Transportation
Federal Aviation Administration
Supplemental Type Certificate

Number: _____

This certificate issued to:

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 _____ of _____.

Original Product

Type Certificate Number:

Make:

Model:

Description of Type Design Change:

Limitations and Conditions:

This certificate and the supporting data which is the basis for approval must 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:

Date Reissued:

Date of Issuance:

Date Amended:

see continuation sheet for additional dates

By Direction of the Administrator

Signature:

for

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 or made available to third persons by licensing agreements in accordance with 14 CFR 21.47. Possession of this Supplemental Type Certificate (STC) document by persons other than the STC holder does not constitute rights to the design data nor to alter an aircraft, aircraft engine, or propeller. The STC's supporting documentation (drawings, instructions, specifications, flight manual supplements, etc.) is the property of the STC holder. An STC holder who allows a person to use the STC to alter an aircraft, aircraft engine, or propeller must provide that person with written permission acceptable to the FAA. (Ref. 14 CFR 21.120).



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Number: _____

Effective Date: _____

INSTRUCTIONS: The transfer endorsement below may be used to notify the appropriate FAA Aircraft Certification Office of the transfer of this Supplemental Type Certificate. The FAA will reissue the certificate in the name of the transferee and forward it to him.

Transfer Endorsement

Transfer the ownership of Supplemental Type Certificate Number: _____

To (Name and address of transferee):

From (Name and address of grantor):

Extent of Authority (if licensing agreement):

Date of transfer:

Signature of grantor: _____

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Supplemental Type Certificate

(Continuation Sheet)

Number: _____

Effective Date: _____

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