



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))

|             |   |  |                   |
|-------------|---|--|-------------------|
| 1. Aircraft | Nationality and Registration Mark<br>U.S.A. N4855M          | Serial No.<br>11-372   |                   |
|             | Make<br>Piper   | Model<br>PA 11   | Series            |
| 2. Owner    | Name (As shown on registration certificate)<br>John P Brown | Address (As shown on registration certificate)<br>Address 291 Martin Ave |                   |
|             |   | City<br>Asbury   | State<br>MO       |
|             |   | Zip<br>64832   | Country<br>U.S.A. |

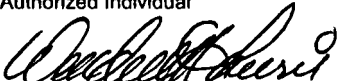
**3. For FAA Use Only**

| 4. Type                  |                          | 5. Unit Identification |              |                                |            |
|--------------------------|--------------------------|------------------------|--------------|--------------------------------|------------|
| Repair                   | Alteration               | Unit                   | Make         | Model                          | Serial No. |
| <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**

|                                |                |   |                                       |
|--------------------------------|----------------|---|---------------------------------------|
| A. Agency's Name and Address   |                | B. Kind of Agency   |                                       |
| Name<br>Wendell H. Laurie      |                | <input checked="" type="checkbox"/> U. S. Certificated Mechanic | <input type="checkbox"/> Manufacturer |
| Address<br>PO Box 553 705 MAIN |                | <input type="checkbox"/> Foreign Certificated Mechanic          | C. Certificate No.                    |
| City<br>Quapaw                 | State<br>OK    | <input type="checkbox"/> Certificated Repair Station            | A&P3008859                            |
| Zip<br>74363                   | Country<br>USA | <input type="checkbox"/> Certificated Maintenance Organization  |                                       |

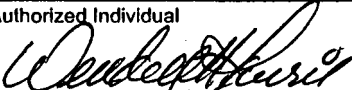
D. I certify that the repair and/or alteration made to the unit(s) identified in item 5 above and described on the reverse or attachments hereto have been made in accordance with the requirements of Part 43 of the U.S. Federal Aviation Regulations and that the information furnished herein is true and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

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

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

|   |  |
|---|--|
| Certificate or<br>Designation No.<br>A&P 3008859 IA | Signature/Date 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 | Nationality and Registration Mark | Date    |
|-------------------------------------|-----------------------------------|---------|
|                                     | U.S.A.                            | 6/27/08 |

Aircraft completely disassembled, inspected and Reassembled using following "New" parts:  
All hardware was replaced with new hardware.

1. Fuselage:

Installed new fuselage from Univair p/n R10560-00 IAW STC-SA0034DE, replicated metal belly, from "Boot cow" aft edge mounting channel rearward 36" as was installed on original airframe. Installed new rudder cables, fairleads, and pulleys. Installed new floor boards and (6) alum. stringers. All side windows, skylight, windshield, firewall & boot cowl new.

2. LH Wing:

Installed following new parts:

Leading edge skins (1) P/N U10630-000 LH inboard, (1) U10631-000 LH inboard center, (1) U13072-005 LH outboard, (1) 15482-000 LH Center, (1) U15723-000 LH tip bow, (1) p/n U453-126 Tip bow. Aileron false spars p/n U15562-000 LH inboard, (1) U15572-000 LH outboard, (3) Aileron hinge brackets p/n U10912-006, (3) 10931-02 clamp brackets, (1) U14581-00 aileron horn stop, (1) trailing edge p/n U15773-000 (1) butt rib #1 p/n U1219-00 (1) aileron p/n 42585-000 new control cables, pulleys & fairleads and hardware.

3. RH Wing:

Installed following new parts:

Leading edge skins (1) p/n U10631-001 RH inboard, (1) U15482-001 RH center, (1) 13072-005 RH outboard, (1) 15723-001 RH tip bow. Aileron false spars (1) 15562-01 RH inboard (1) 15572-01 RH outboard (3) aileron hinge brackets p/n U10912-006, (3) 10931-02 clamp brackets, (1) U14581-000 aileron horn stop, (1) trailing edge p/n U15773-000 (1) butt rib #1 p/n U1219-01, (1) RH fuel tank cover p/n 12570-009 (1) aileron p/n 42585-001. New control cables, pulleys, and fairleads and hardware.

4. Empenage:

(2) Univair stabilizers p/n 40643-000, (1) jack screw yoke p/n U42692-00, (1) jack screw p/n U42961-102 (1) link assy p/n U14180-002 (1) inner tube (aft) p/n U86062-079 (1) inner tube (fwd) p/n U86062-080 assembled and rigged IAW Piper maintenance information.

5. Fuel System "MODIFIED" per Ailee Dodge STC-SA455AL instructions. Univair fuel valve assy, p/n U491-947 installed. Header tank p/n U12837-000 for RH wing tank installed behind baggage compartment. Fuel lines fabricated from 3/8" Alum. tubing and "AN" fittings. Note: "RH wing tank installed previously on 337 dated 8/8/80" and was reassembled as was installed at that time on Field Approval.

6. All "fabric covered components" were inspected and covered with medium weight polyfiber IAW STC SA1008WE and Procedure Manual #1 Rev. 21. Fabric painted with "Polytone" PT140 orange yellow and PT177 Christian Eagle blue. Metal painted with "Enamel" EN140 and EN177. A white epoxy primer base coat on metal structure and insignia. White base coat on fabric components was applied under Color coats.

For Continued Airworthiness see Polyfiber Manual No. 1 and FAR 43 appendix D and applicable chapters of AC43.13-1B.

7. Aircraft re-assembled & rigged IAW Piper Service memo #5 and weighted. Equipment list and weight and balance updated to reflect changes.

For Continued Airworthiness use Standard practices found in applicable chapters/sections AC43.13-1B/2A and/or Piper inspection/maintenance instructions and FAR 43 appendix "D" and appropriate STC Instructions.



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OMB No. 2120-0020  
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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<br>U.S.A. N4855M           | Serial No.<br>11-372   |                   |
|             | Make<br>Piper  | Model<br>PA-11   | Series            |
| 2. Owner    | Name (As shown on registration certificate)<br>John P. Brown | Address (As shown on registration certificate)<br>Address 291 Martin Ave |                   |
|             |  | City<br>Asbury   | State<br>MO       |
|             |  | Zip<br>64832   | Country<br>U.S.A. |

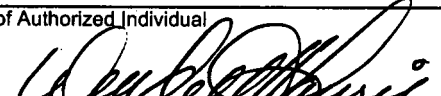
**3. For FAA Use Only**

| 4. Type                  |                          | 5. Unit Identification |              |                                |            |
|--------------------------|--------------------------|------------------------|--------------|--------------------------------|------------|
| Repair                   | Alteration               | Unit                   | Make         | Model                          | Serial No. |
| <input type="checkbox"/> | <input type="checkbox"/> | AIRFRAME               |              | (As described in Item 1 above) |            |
| <input type="checkbox"/> | <input type="checkbox"/> | POWERPLANT             | TCM          | C90-8F                         | 40386-8-8  |
| <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                         | Wendell H. Laurie    | <input checked="" type="checkbox"/> U. S. Certified Mechanic   | Manufacturer       |
| Address                      | PO Box 553 705 MAIN  | <input type="checkbox"/> Foreign Certificated Mechanic         | C. Certificate No. |
| City                         | Quapaw State OK      | <input type="checkbox"/> Certificated Repair Station           | A&P 3008859        |
| Zip                          | 74363 Country U.S.A. | <input type="checkbox"/> Certificated Maintenance Organization |                    |

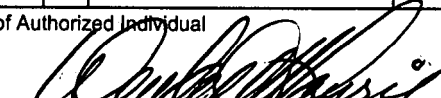
D. I certify that the repair and/or alteration made to the unit(s) identified in item 5 above and described on the reverse or attachments hereto have been made in accordance with the requirements of Part 43 of the U.S. Federal Aviation Regulations and that the information furnished herein is true and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

**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.<br>A&P 3008859 IA | Signature/Date 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.

|        |         |
|--------|---------|
| U.S.A. | Date    |
|        | 7/21/08 |

8. Description of Work Accomplished

1. Installed EAA Auto Fuel STC SA01944CH and SE01943CH per Doc. No. EAA STC INST- "Auto Fuel Installation Instructions" Rev. 1, 02-2004 and EAA SB #2000-1 Rev. 1 dated 3-1-2000.

2. Installed placards at LH & RH Fuel Inlets. Tank "Capacities" Marked @ 18 gallons each.

3. "Flight Manual Supplement" Placed in Aircraft document.

4. For "Continued Airworthiness", refer to Doc. No. EAA STCICA, Rev. 03/2006 for instructions.

-----END-----



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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).

|                    |  |  |
|--------------------|--|--|
| <b>1. Aircraft</b> | Make<br>Piper  | Model<br>PA 11   |
|                    | Serial No.<br>11-372   | Nationality and Registration Mark<br>USA-N4855M  |
| <b>2. Owner</b>    | Name (As shown on registration certificate)<br>RLS Rentals Co Inc. dba Mizzou Aviation | Address (As shown on registration certificate)<br>PMB #400<br>PO Box 1446<br>Joplin, MO 64802-1446 |

**3. For FAA Use Only**

**4. Unit Identification**

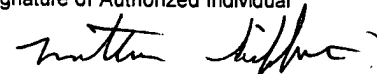
**5. Type**

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

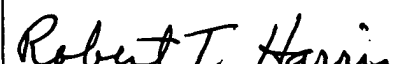
**6. Conformity Statement**

|  |   |  |
|--|---|--|
| <b>A. Agency's Name and Address</b><br>Nathan Griffith<br>1350 S Hardwood Ln<br>Joplin, MO 64801 | <b>B. Kind of Agency</b><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 | <b>C. Certificate No.</b><br>A&P 2701722 |
|--|---|--|

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>8/1/06 | 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 <input checked="" type="checkbox"/> APPROVED <input type="checkbox"/> REJECTED |                              |   |  |                 |  |
| BY  | FAA Flt. 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>8/1/06   |                              | Certificate or Designation No.<br>A&P356405175 IA | 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

Removed original combination oil pressure/oil temperature gage. Installed Mitchell oil temp gage p/n D1-111-5094 s/n 1026 and oil pressure gage p/n D1-111-5066 s/n 1068 referencing AC 4313-2A chp. 1 par's 1-12. Weight & balance unchanged.

-----END-----

[ ] Additional Sheets Are Attached



US Department  
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Federal Aviation  
Administration

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

Form Approved  
OMB No. 2120-0020

For FAA Use Only

Office Identification

*John C. P. O. S.*

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).

|                    |  |  |
|--------------------|--|--|
| <b>1. Aircraft</b> | Make<br>PIPER  | Model<br>PA-11   |
|                    | Serial No.<br>11-372   | Nationality and Registration Mark<br>USA-N4855M  |
| <b>2. Owner</b>    | Name (As shown on registration certificate)<br>RLS RENTAL CO. INC. DBA | Address (As shown on registration certificate)<br>PMB 400<br>POBOX 1446<br>JOPLIN, MO. 64802 |

**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**

|   |   |  |
|---|---|--|
| <b>A. Agency's Name and Address</b><br>RON SIDENSTRIKER<br>PO BOX 72<br>NECK CITY, MO. <i>64849</i> | <b>B. Kind of Agency</b><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 | <b>C. Certificate No.</b><br>A&P 2843114 |
|---|---|--|

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>2/3/06 | Signature of Authorized Individual<br><i>Ron Sidenstriker</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 Fit Standards Inspector | Manufacturer                                     | X   | Inspection Authorization                                | Other (Specify) |
|   | FAA Designee                | Repair Station                                   |   | Person Approved by Transport Canada Airworthiness Group |                 |
| Date of Approval or Rejection<br>2/3/06 |                             | Certificate or Designation No.<br>A&P 3008859 IA | Signature of Authorized Individual<br><i>Robert H. Hurler</i> |   |                 |

# 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 vortex generators to the wing upper surface at the leading edge, in accordance with Drawing Package MA2031, Revision IR, dated March 17, 1994 and Installation Manual MA2032, revision A, dated MAY 5TH, 1994, PER STC#SA00073SE.

Instructions for continued airworthiness of micro vortex generator installations are stated on VG Operating Placard #J3008 which must be installed in an easily seen location in the cockpit. This placard states: "If more than 5 VG's are damaged or missing, the aircraft is not airworthy". To make it airworthy, the missing VGs in excess of five need to be replaced by the installation of a new (replacement) part. Installation is accomplished with LOCTITE DEPEND ADHESIVE#330. No other maintenance or inspections are necessary. *EQUIPMENT LIST UPDATED.*

Negligible weight change.

\_\_\_\_\_  
END

| Additional Sheets Are Attached





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|             |  |   |
|-------------|--|---|
| 1. Aircraft | Make<br>Piper  | Model<br>PA-11S   |
|             | Serial No.<br>11-372   | Nationality and Registration Mark<br>N4855M   |
| 2. Owner    | Name (As shown on registration certificate)<br>Kenneth B. Carter | Address (As shown on registration certificate)<br>RR 1 Box 232C<br>Honor, Mi. 49640 |

**3. For FAA Use Only**

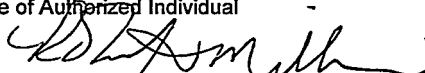
|  |  |  |  |  |  |
|--|--|--|--|--|--|
|  |  |  |  |  |  |
|--|--|--|--|--|--|

| 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**

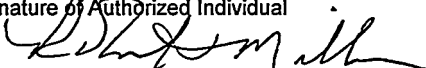
|   |  |                    |
|---|--|--------------------|
| A. Agency's Name and Address                                  | B. Kind of Agency  | C. Certificate No. |
| Robert F. Miller<br>2918 Territorial Rd.<br>Leslie, Mi. 49251 | <input checked="" type="checkbox"/> U.S. Certificated Mechanic | 376361494          |
|   | <input type="checkbox"/> Foreign Certificated Mechanic         |                    |
|   | <input 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<br>May 8, 1998 | 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 Flt. Standards Inspector | Manufacturer                                | <input checked="" type="checkbox"/>  | Inspection Authorization                                | Other (Specify) |
|  | FAA Designee                 | Repair Station                              | <input type="checkbox"/>   | Person Approved by Transport Canada Airworthiness Group |                 |
| Date of Approval or Rejection<br>May 8, 1998 |                              | Certificate or Designation No.<br>376361494 | Signature of Authorized Individual<br> |   |                 |

## NOTICE

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### 8. Description of Work Accomplished

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

Aircraft logbook entry of 10-24-1976 reads as follows: Aircraft completely recovered with Ceconite 101 fabric in accordance with Cooper 101 manual. No mention of STC # or FAA form 337 made in aircraft records. I have inspected this aircraft and find that the fabric recovering work conforms to Cooper 101 manual and the requirements of STC # SA4-907. Logbook entry made and aircraft approved for return to service.

\*\*\*\*\*End\*\*\*\*\*

☐ Additional Sheets Are Attached



U.S. Department  
of Transportation  
Federal Aviation  
Administration

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

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**For FAA Use Only**

Office Identification

*GL-23 KAPB*

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)

|             |  |   |
|-------------|--|---|
| 1. Aircraft | Make<br>Piper  | Model<br>PA-11S   |
|             | Serial No.<br>11-372   | Nationality and Registration Mark<br>N4855M   |
| 2. Owner    | Name (As shown on registration certificate)<br>Kenneth B. Carter | Address (As shown on registration certificate)<br>RR 1 Box 232C<br>Honor, Mi. 49640 |

**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>Robert F. Miller<br>2918 Territorial Rd.<br>Leslie, Mi. 49251 | B. Kind of Agency  | C. Certificate No.<br>376361494 |
|   | <input checked="" type="checkbox"/> U.S. Certificated Mechanic |                                 |
|   | <input type="checkbox"/> Foreign Certificated Mechanic         |                                 |
|   | <input 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<br>May 8, 1998 | Signature of Authorized Individual<br><i>Robert F. Miller</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   | <input type="checkbox"/> FAA Flt. Standards Inspector | <input type="checkbox"/> Manufacturer       | <input checked="" type="checkbox"/> Inspection Authorization                     | Other (Specify) |
|  | <input type="checkbox"/> FAA Designee                 | <input type="checkbox"/> Repair Station     | <input type="checkbox"/> Person Approved by Transport Canada Airworthiness Group |                 |
| Date of Approval or Rejection<br>May 8, 1998 |   | Certificate or Designation No.<br>376361494 | Signature of Authorized Individual<br><i>Robert F. Miller</i>                    |                 |

## 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.)*

Install Brackett air filter assy.# 4106 in accordance with instructions of STC-S71GL List # 1 FAA-PMA-Supplement # 1 of STC SA71GL. Entry made in aircraft records and copy of STC placed in aircraft records.

END

\*\*\*\*\*End\*\*\*\*\*

☐ Additional Sheets Are Attached

| U.S. DEPARTMENT OF TRANSPORTATION<br>FEDERAL AVIATION ADMINISTRATION   |   |                                |  | Form Approved<br>Budget Bureau No. 04-R060.1   |                    |
|--|---|--------------------------------|--|--|--------------------|
| <b>MAJOR REPAIR AND ALTERATION</b><br>(Airframe, Powerplant, Propeller, or Appliance)  |   |                                |  | FOR FAA USE ONLY   |                    |
| 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.  |   |                                |  | OFFICE IDENTIFICATION  |                    |
| 1. AIRCRAFT  | MAKE  | Piper                          | MODEL  | PA-11 & PA-11S   |                    |
|  | SERIAL NO.                                  | 11-372                         | NATIONALITY AND REGISTRATION MARK  | N4855M   |                    |
| 2. OWNER   | NAME (As shown on registration certificate) |                                | ADDRESS (As shown on registration certificate)                                       |  |                    |
|  | Kenneth B. Carter                           |                                | Box 207<br>Drummond Island, MI 49726   |  |                    |
| 3. FOR FAA USE ONLY  |   |                                |  |  |                    |
|  |   |                                |  |  |                    |
| 4. UNIT IDENTIFICATION   |   |                                |  |  | 5. TYPE            |
| UNIT   | MAKE  | MODEL                          | SERIAL NO.   | REPAIR   | ALTERATION         |
| AIRFRAME   | As described in item 1 above                |                                |  |  | XX                 |
| POWERPLANT   | Continental                                 | C-90-8F                        | 40386-8-8  |  | XX                 |
| PROPELLER  |   |                                |  |  |                    |
| APPLIANCE  | TYPE  |                                |  |  |                    |
|  | MANUFACTURER                                |                                |  |  |                    |
| 6. CONFORMITY STATEMENT  |   |                                |  |  |                    |
| A. AGENCY'S NAME AND ADDRESS   |   |                                | B. KIND OF AGENCY  |  | C. CERTIFICATE NO. |
| Don DeRuiter<br>Northwoods Aviation<br>3780 Dickerson Rd.<br>Lake City, MI 49651   |   |                                | <input checked="" type="checkbox"/> U.S. CERTIFICATED MECHANIC                       |  | A&P2104542         |
|  |   |                                | <input type="checkbox"/> FOREIGN CERTIFICATED MECHANIC                               |  |                    |
|  |   |                                | <input 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   |   |                                | SIGNATURE OF AUTHORIZED INDIVIDUAL   |  |                    |
| June 18, 1984  |   |                                |  |  |                    |
| 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                   | <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   |                    |
| June 18, 1984  |   | A&P2104542IA                   |  |  |                    |

### 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.

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

**Installed S.T.C. # SE634GL and S.T.C. # SA736GL permitting use  
of unleaded automotive gasoline meeting ASTM Specification D-439.**

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

☐ ADDITIONAL SHEETS ARE ATTACHED

| DEPARTMENT OF TRANSPORTATION<br>FEDERAL AVIATION ADMINISTRATION  |   |  |  | Form Approved<br>Budget Bureau No. 04-R060.1                      |                    |  |
|--|---|--|--|---|--------------------|--|
| <b>MAJOR REPAIR AND ALTERATION</b><br>(Airframe, Powerplant, Propeller, or Appliance)  |   |  |  | FOR FAA USE ONLY<br>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.  |   |  |  |   |                    |  |
| 1. AIRCRAFT  | MAKE  | PIPER  |  | MODEL   | PA-11              |  |
|  | SERIAL NO.  | 11-372   |  | NATIONALITY AND REGISTRATION MARK                                 | N4855M             |  |
| 2. OWNER   | NAME (As shown on registration certificate)<br>CARTER, KENNETH B.   |  |  | ADDRESS (As shown on registration certificate)<br>HONOR, MI 49640 |                    |  |
|  | <div style="text-align: center;"> <b>3. FOR FAA USE ONLY</b><br/> <small>THE DATA/REPAIR IDENTIFIED HEREIN COMPLIES WITH THE APPLICABLE AIRWORTHINESS REQUIREMENTS AND IS APPROVED FOR THE ABOVE DESCRIBED AIRCRAFT, SUBJECT TO CONFORMITY INSPECTION BY A PERSON AUTHORIZED IN FAR 43, SECTION 43.7"</small><br/>           DATE 8/8/80 SIGNATURE <i>[Signature]</i><br/>           FAA GL-GADO-8, GRAND RAPIDS, MICHIGAN         </div> |  |  |   |                    |  |
| <b>4. UNIT IDENTIFICATION</b>  |   |  |  |   | <b>5. TYPE</b>     |  |
| UNIT   | MAKE  | MODEL  | SERIAL NO.   | REPAIR  | ALTERATION         |  |
| AIRFRAME   | ***** (As described in item 1 above) *****  |  |  |   | X                  |  |
| POWERPLANT   | CONTINENTAL   | C-90-8F  | 40386-8-8  |   | X                  |  |
| PROPELLER  |   |  |  |   |                    |  |
| APPLIANCE  | TYPE  |  |  |   |                    |  |
|  | MANUFACTURER  |  |  |   |                    |  |
| <b>6. CONFORMITY STATEMENT</b>   |   |  |  |   |                    |  |
| A. AGENCY'S NAME AND ADDRESS   |   |  | B. KIND OF AGENCY  |   | C. CERTIFICATE NO. |  |
| Don DeRuiter<br>NORTHWOODS AVIATION<br>3780 DILKERSON RD.<br>LAKE CITY, MI 49651   |   |  | <input checked="" type="checkbox"/> U.S. CERTIFICATED MECHANIC |   | A4P2104542         |  |
|  |   |  | <input type="checkbox"/> FOREIGN CERTIFICATED MECHANIC         |   |                    |  |
|  |   |  | <input 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<br>7/28/80  |   |  | SIGNATURE OF AUTHORIZED INDIVIDUAL<br><i>Don DeRuiter</i>      |   |                    |  |
| <b>7. APPROVAL FOR RETURN TO SERVICE</b>   |   |  |  |   |                    |  |
| 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                                   | <input checked="" type="checkbox"/>                            | INSPECTION AUTHORIZATION  |                    |  |
|  | FAA DESIGNEE  | REPAIR STATION                                 | <input type="checkbox"/>                                       | OTHER (Specify)   |                    |  |
| DATE OF APPROVAL OR REJECTION<br>8/18/80   |   | CERTIFICATE OR DESIGNATION NO.<br>A4P21045421A |  | SIGNATURE OF AUTHORIZED INDIVIDUAL<br><i>Don DeRuiter</i>         |                    |  |

# 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 PIPER PA-18 FUEL TANK IN RIGHT WING. RIGHT WING WAS MODIFIED TO LEFT WING CONFIGURATION TO PERMIT INSTALLATION OF FUEL TANK.

THE FOLLOWING PARTS WERE USED:

ONE # 10849-25 PA-18 RH FUEL TANK.  
TWO # 10649-03 PA-18 MOUNTING STRAPS  
TWO # 10650-02 PA-18 MOUNTING STRAPS  
TWO # 10648-03 PA-18 MOUNTING STRAPS  
ONE # 10657-05 PA-18 TANK COVER  
ONE # 10804-00 PA-18 FUEL GAUGE  
ONE # 10647-00 PA-18 DUAL BRAKE TUBE  
ONE # 100 HD 3/8" IMPERIAL FUEL SHUTOFF VALVE  
AN TUBE FITTINGS AS REQUIRED  
3/8" ALUMINUM TUBING AS REQUIRED  
ONE CONTINENTAL O-200 ENGINE OIL SUMP

FUEL SYSTEM WAS INSTALLED AS FOLLOWS:

ORIGINAL LEFT TANK FUEL SYSTEM WAS NOT CHANGED EXCEPT THAT A MS20825-60 TEE WAS INSTALLED IN THE INLET OF SEDIMENT BOWL TO PERMIT INSTALLATION OF FUEL LINES FROM LEFT AND RIGHT TANKS.

RIGHT TANK FEEDS FROM REAR OF TANK ONLY. FUEL LINE IS ROUTED ABOVE CABIN DOOR AND DOWN RIGHT SIDE WINDSHIELD SUPPORT TO FUEL SHUTOFF VALVE LOCATED ON RIGHT SIDE OF COCKPIT BELOW INSTRUMENT PANEL. FROM SHUTOFF VALVE THE FUEL LINE RUNS DOWN AND FORWARD TO FIREWALL AND THEN LEFT AND DOWN TO THE MS20825-60 TEE INSTALLED IN SEDIMENT BOWL. INSTALLED THE FOLLOWING PLACARDS ABOVE FUEL VALVES:

LEFT VALVE - "LEFT TANK MUST BE ON FOR TAKEOFF AND LANDING" AND "CAPACITY - 18 GAL."

RIGHT VALVE - "RIGHT TANK FOR LEVEL FLIGHT ONLY" AND "CAPACITY - 18 GAL."

INSTALLED 6 qt. CAPACITY OIL SUMP TO MEET MINIMUM OIL REQUIREMENTS OF C.A.M. 4a621.

ALL WORK WAS DONE IN ACCORDANCE WITH A.C. 43.13-1A, 43.13-2A, C.A.M. 4a605, 4a606, 4a607, 4a608, 4a609, 4a610, 4a611, 4a612, 4a614, 4a615. WEIGHT AND BALANCE DATA ENTERED IN AIRCRAFT RECORDS.

-END-

ADDITIONAL SHEETS ARE ATTACHED



| <b>U. S. DEPARTMENT OF COMMERCE</b><br><b>CIVIL AERONAUTICS ADMINISTRATION</b>   |  | <b>Form Approved. Budget Bureau No. 41-B041.5</b>  |
|--|--|--|
| <b>APPLICATION FOR AIRWORTHINESS CERTIFICATE<br/>AND/OR ANNUAL INSPECTION OF AN AIRCRAFT</b>   |  | <b>INSTRUCTIONS</b><br>Please print or type. Submit this form to the Civil Aeronautics Administration Aviation Safety Field Representative.  |
| <b>1. TYPE OF APPLICATION (Check which)</b>  |  |  |
| <input type="checkbox"/> a. ORIGINAL ISSUANCE OF CERTIFICATE<br><input checked="" type="checkbox"/> b. ANNUAL INSPECTION FOR RENEWAL OF CERTIFICATE<br><input type="checkbox"/> c. AMENDMENT OR MODIFICATION OF CURRENT CERTIFICATE  |  | <input type="checkbox"/> d. RECERTIFICATION UNDER THE PROVISIONS OF CAR 8<br><input type="checkbox"/> e. MULTIPLE CERTIFICATE UNDER THE PROVISIONS OF CAR 8<br><input type="checkbox"/> f. |
| <b>2. AIRWORTHINESS CLASSIFICATION (Check appropriate item(s))</b><br>It is requested that the Certificate of Airworthiness be issued to permit operation of the aircraft in the following airworthiness classification(s):  |  |  |
| <input checked="" type="checkbox"/> a. STANDARD (NORMAL, UTILITY, ACROBATIC, TRANSPORT CATEGORIES)<br><input type="checkbox"/> b. LIMITED (SEE CAR 9)<br><input type="checkbox"/> c. RESTRICTED (SEE CAR 8)<br>(Check the restricted special purposes operation(s) to be conducted)<br><div style="display: flex; justify-content: space-between;"> <div style="width: 48%;"> <input type="checkbox"/> AGRICULTURAL AND PEST CONTROL<br/> <input type="checkbox"/> AERIAL ADVERTISING<br/> <input type="checkbox"/> AERIAL SURVEYING<br/> <input type="checkbox"/> GLIDER TOWING             </div> <div style="width: 48%;"> <input type="checkbox"/> PATROLLING<br/> <input type="checkbox"/> FOREST AND WILDLIFE CONSERVATION<br/> <input type="checkbox"/> WEATHER CONTROL<br/> <input type="checkbox"/> OTHER             </div> </div> <input type="checkbox"/> d. EXPERIMENTAL<br>(Check the type of experimental operation(s) to be conducted)<br><div style="display: flex; justify-content: space-between;"> <div style="width: 48%;"> <input type="checkbox"/> RESEARCH AND DEVELOPMENT<br/> <input type="checkbox"/> AMATEUR-BUILT<br/> <input type="checkbox"/> DEMONSTRATION             </div> <div style="width: 48%;"> <input type="checkbox"/> RACING<br/> <input type="checkbox"/> EXHIBITION<br/> <input type="checkbox"/> OTHER             </div> </div> |  |  |
| <b>3. AIRCRAFT IDENTIFICATION (Complete all items)</b>   |  |  |
| <b>a. AIRCRAFT MAKE</b><br>PIPER   | <b>b. AIRCRAFT MODEL</b><br>PA-11  | <b>c. AIRCRAFT SERIAL NO.</b><br>11-372  |
| <b>d. ENGINE MAKE</b><br>CONTINENTAL   | <b>e. ENGINE MODEL</b> C90-8-F on 337 Antif<br>2-65-8-P 11/19/62                   |  |
| <b>4. AIRCRAFT REGISTRATION INFORMATION (Complete all items)</b>   |  |  |
| <b>a. REGISTERED OWNER'S FULL NAME</b><br>George F. Haveman  | <b>b. PERMANENT MAILING ADDRESS</b><br>HOME ACRES SKY RANCH<br>LANS CITY, MICHIGAN | <b>c. AIRCRAFT NATIONALITY AND REGISTRATION MARK</b><br>N- 4855M   |
| <b>5. AIRCRAFT OWNER'S CERTIFICATION (Check and complete appropriate item)</b><br>I hereby certify that I am the registered owner (or his agent) of the aircraft identified in Item 3 above which is registered* with the Civil Aeronautics Administration as required by the Regulations of the Administrator, Part 501 or 502 and when operated displays the following evidence of registration:   |  |  |
| <input checked="" type="checkbox"/> a. CERTIFICATE OF REGISTRATION, FORM ACA-500 (PART A), DATE OF ISSUE <u>October 3, 1952</u><br><input type="checkbox"/> b. APPLICATION FOR REGISTRATION, FORM ACA-500 (PART B), FORM ACA-500, PART A, FORWARDED TO CAA AIRCRAFT RECORDS BRANCH, W-300 ON _____ (DATE)<br><input type="checkbox"/> c. DEALER'S REGISTRATION CERTIFICATE, FORM ACA-1707, DATED _____   |  |  |
| <small>*In order to be eligible for registration an aircraft must be owned by a citizen of the United States, as defined by Section 1 (13) of the Civil Aeronautics Act of 1926, as amended.</small>   |  |  |
| <b>ATTACHMENTS (Check which)</b>   |  |  |
| <input checked="" type="checkbox"/> ACA-319 <input type="checkbox"/> WEIGHT AND BALANCE REPORT<br><input type="checkbox"/> ACA-337 <input type="checkbox"/> DATA, DRAWINGS, ETC.<br><input type="checkbox"/> ACA-317 <input type="checkbox"/> UNAPPROVED DEVIATION DATA  |  |  |
| Signature of Registered Owner or Authorized Agent: <u>George F. Haveman</u><br>Date: <u>July 5-1956</u>  |  | Title: <u>Owner</u>  |

JUL 18 1956

Ann  
 9-26-6  
 M18

MC

DATE: 3-5-85

U. S. DEPARTMENT OF COMMERCE  
CIVIL AERONAUTICS ADMINISTRATION

AIRCRAFT INSPECTION REPORT

(To be completed by a CAA representative or approved repair station)

The aircraft described in Item 3 on the reverse of this form has been inspected and found to conform to the following:  
(Check and complete applicable items)

1. AIRCRAFT AND ENGINE CERTIFICATION BASIS

- a. ☒ AIRCRAFT SPECIFICATION NO. 691 THROUGH SHEET REVISION NO. 28  
b. ☐ AIRCRAFT LISTING PAGE NO. \_\_\_\_\_  
c. ☒ AIRWORTHINESS DIRECTIVE SUMMARY 1956 THROUGH CARD NO. 13  
d. ☐ CIVIL AIR REGULATION PART 8 (MODIFIED TYPE CERTIFICATE)

2. AIRCRAFT AND ENGINE OPERATING RECORDS

- a. ☐ AIRCRAFT NEW—NO PREVIOUS OPERATION OR MAINTENANCE HISTORY  
b. ☒ COMPLIANCE WITH APPLICABLE AIRWORTHINESS DIRECTIVES RECORDED  
c. ☒ AIRCRAFT RECORDS INDICATE THE AIRFRAME HAS BEEN OPERATED A TOTAL OF 805:25 HOURS  
d. ☒ ENGINE RECORDS INDICATE THE FOLLOWING OPERATION:  
SERIAL NO. 5977978 TOTAL HOURS 805:25  
SERIAL NO. \_\_\_\_\_ TOTAL HOURS \_\_\_\_\_  
SERIAL NO. \_\_\_\_\_ TOTAL HOURS \_\_\_\_\_  
SERIAL NO. \_\_\_\_\_ TOTAL HOURS \_\_\_\_\_

3. PREVIOUS INSPECTION RECORD (INSPECTION RECORDED ON FORM ACA-319)

- a. LAST AIRWORTHINESS INSPECTION CONDUCTED July 5, 1956 (DATE)  
☐ BY AIRCRAFT MANUFACTURER  
☐ BY APPROVED REPAIR STATION, CERTIFICATE NO. \_\_\_\_\_  
☒ BY MECHANIC, CERTIFICATE NO. 22P 1234684  
b. ☒ PERIODIC AIRCRAFT INSPECTION REPORT, FORM ACA-319, WAS RETURNED TO OWNER

4. AIRWORTHINESS DOCUMENTS ISSUED OR REVIEWED

- a. ☐ OPERATION LIMITATIONS, FORM ACA-309, WAS ISSUED (COPY ATTACHED)  
b. ☒ CURRENT OPERATION LIMITATIONS, FORM ACA-309, IS AVAILABLE IN AIRCRAFT  
c. ☐ CURRENT APPROVED AIRPLANE FLIGHT MANUAL IS AVAILABLE IN AIRCRAFT  
d. ☒ CURRENT WEIGHT AND BALANCE INFORMATION IS AVAILABLE IN AIRCRAFT  
e. ☒ THIS INSPECTION HAS BEEN RECORDED IN THE AIRCRAFT RECORDS  
f. ☒ CERTIFICATE OF AIRWORTHINESS, FORM ACA-1362, ISSUED TO EXPIRE July 5, 1957 (DATE)  
g. ☒ PREVIOUS FORM ACA-1362 WAS ISSUED TO EXPIRE July 5, 1956 (DATE)  
BY Robert W. Vandell Water (NAME OF ISSUING REPRESENTATIVE) 3323 (DESIGNATION NO.)

5. CAA APPROVED REPAIR STATION CERTIFICATION

The aircraft described on the reverse has been inspected under the authority accorded certificated repair station No. \_\_\_\_\_ by CAR 52 and was found to be:

- ☐ AIRWORTHY  
☐ UNAIRWORTHY

(REPAIR STATION AUTHORIZED SIGNATURE)

(DATE)

6. CAA REPRESENTATIVE CERTIFICATION

I HAVE INSPECTED THE AIRCRAFT DESCRIBED ON THE REVERSE AND FOUND IT ☒ AIRWORTHY ☐ UNAIRWORTHY  
(Check appropriate item)

|   |  |                        |   |
|---|--|------------------------|---|
| DESIGNER'S SIGNATURE<br><u>R. W. Vandell Water</u>          | DESIGNATION NO.<br><u>3323</u>                 | DATE<br><u>7/5/56</u>  | <input checked="" type="checkbox"/> ACCEPTED<br><input type="checkbox"/> REINSPECTED<br><input type="checkbox"/> SPOT CHECKED |
| AVIATION SAFETY AGENT'S SIGNATURE<br><u>Ray P. W. Alham</u> | CAA DESIGNATION NO.<br><u>Reg. 3 KC ASDO 8</u> | DATE<br><u>7-20-56</u> |   |

☐ ATTACHMENT

JUL 18 1956

| U. S. DEPARTMENT OF COMMERCE<br>CIVIL AERONAUTICS ADMINISTRATION  |  |  |   | Form approved<br>Budget Bureau No. 41-R082.4       |                       |
|---|--|--|---|--|-----------------------|
| MAJOR REPAIR AND ALTERATION FORM (AIRFRAME, POWERPLANT, PROPELLER OR APPLIANCE)   |  |  |   |  |                       |
| 1. AIRCRAFT   | MAKE<br><b>PIPER</b>                                   | MODEL<br><b>PA-11</b>  | SERIAL NO.<br><b>11-372</b>   | NATIONALITY AND REGISTRATION MARK<br><b>N4855M</b> |                       |
| 2. OWNER  | NAME (First, middle, last)<br><b>George F. Haveman</b> |  | ADDRESS (Street and number, city, zone and State)<br><b>Home Acres Sky Ranch<br/>Lake City Michigan</b> |  |                       |
| 3. COMPLETE ONLY FOR UNIT REPAIRED AND/OR ALTERED. DESCRIBE WORK ACCOMPLISHED ON REVERSE IN ACCORDANCE WITH CIVIL AERONAUTICS MANUAL 18.  |  |  |   |  |                       |
| UNIT  | MAKE   | MODEL  | SERIAL NO.  | NATURE OF WORK (Check)                             |                       |
|   |  |  |   | MAJOR REPAIR                                       | MAJOR ALTERATION      |
| a. AIRFRAME   | ***** (As described in items 1 above) *****            |  |   |  | X                     |
| b. POWERPLANT   |  |  |   |  |                       |
| c. PROPELLER  |  |  |   |  |                       |
| d. APPLIANCE  | TYPE AND MANUFACTURER                                  |  |   |  |                       |
| 4. AIRCRAFT WEIGHT AND BALANCE DATA<br>*AFTER the repairs and/or alterations described below were made.   |  |  |   |  |                       |
| This item must be completed by repair or alteration agency. However, in the case of a spare component, it will not be completed until such component is installed in an aircraft. At this time, it will be completed by the installing agency, if applicable.   |  |  |   |  |                       |
| CATEGORY  | EMPTY WEIGHT (Pounds)*                                 |  | EMPTY CENTER OF GRAVITY (Inches from datum)*  |  | USEFUL LOAD (Pounds)* |
| Standard  | Land   | 798.25   | + 14.10"  |  | 411 #                 |
|   | Ski  | 798.25   | + 14.10"  |  | 411 #                 |
| 5. CONFORMITY STATEMENT (Complete and check)  |  |  |   |  |                       |
| a. AGENCY NAME AND ADDRESS  |  | b. KIND OF AGENCY  |   | c. CERTIFICATE NO.                                 |                       |
| <b>George F. Haveman<br/>Home Acres Sky Ranch<br/>Lake City, Michigan</b>   |  | <input checked="" type="checkbox"/> U. S. Certified Mechanic.<br><input type="checkbox"/> Foreign Certified Mechanic.<br><input type="checkbox"/> Certified Repair Station.<br><input type="checkbox"/> Manufacturer.<br><input type="checkbox"/> (Check if repair or alteration was made under delegation option procedures.) |   | <b>AAP-123464</b>                                  |                       |
| d. I certify that the repair and/or alteration made to the unit(s) identified under item 3 above and described on the reverse or attachments hereto have been made in accordance with the requirements of Part 18 of the U. S. Civil Air Regulations and that the information furnished herein is true and correct to the best of my knowledge.   |  |  |   |  |                       |
| <b>November 13, 1962</b><br>(Date repair and/or alteration completed)   |  | <i>George Haveman</i><br>(Signature of authorized individual)  |   |  |                       |
| 6. APPROVAL FOR RETURN TO SERVICE (Check and complete appropriate items)  |  |  |   |  |                       |
| Pursuant to the authority specified below the unit identified in item 3 was inspected in the manner prescribed by the Administrator and is  |  |  |   |  |                       |
| <input checked="" type="checkbox"/> APPROVED } BY { <input type="checkbox"/> CAA Designee <input type="checkbox"/> Manufacturer <input type="checkbox"/> Canadian Department of Transport Inspector of Aircraft<br><input type="checkbox"/> REJECTED <input type="checkbox"/> CAA Aviation Safety Agent <input type="checkbox"/> Repair Station <input checked="" type="checkbox"/> Other (Specify) <i>Inspection authorized mechanic</i> |  |  |   |  |                       |
| <b>Nov. 19, 1962</b><br>(Date of approval or rejection)   |  | <i>Robert W. Vandewater 153418</i><br>(Signature of authorized individual; title or identification number)   |   |  |                       |
| 7. TO BE COMPLETED ONLY BY CAA PERSONNEL  |  |  |   |  |                       |
| a. <input type="checkbox"/> Forwarded for engineering comment <input type="checkbox"/> See attached memorandum  |  |  |   |  |                       |
| b. <input checked="" type="checkbox"/> Accepted <b>11/28/62</b> (Date) <input type="checkbox"/> Reinspected (Date) <input type="checkbox"/> Spot Checked (Date)   |  |  |   |  |                       |
| CENTRAL REGION<br>GROUP 8<br>(CAA designation number)   |  | <i>L. A. Adams</i><br>Reviewed By<br>L. A. ADAMS, CE - GADO-4<br>(Signature Aviation Safety Agent)   |   |  |                       |

## INSTRUCTIONS

This form must be completed in duplicate each time a major repair and/or alteration is made of an aircraft, airframe, powerplant, propeller or appliance. After the repair and/or alteration has been inspected and item 6 completed, the original copy of this form will be made available to the aircraft owner for retention as part of the aircraft records. The duplicate copy is retained by the CAA for administrative purposes.

See CAM 18 for detailed instructions concerning the information to be furnished with this form and instructions concerning its preparation.

## 6. DESCRIPTION OF WORK ACCOMPLISHED.

Removed clearance lights and dry battery.  
Removed Item 101. - Wood propeller.  
Removed Item 311 D (1) A65-8-F Engine.

Installed Item 311 D (5). C90-8-F. Engine.  
" " 5 1890 Met-L propeller.  
" " 307 Wheel Streamlines.

Aircraft as weighed empty.

| Item      | Weight | Arm   | Moment   |
|-----------|--------|-------|----------|
| R/W/Wheel | 370 #  | 2.6 " | 962.0    |
| L/W/Wheel | 382    | 2.6   | 990.8    |
| Tail /Whl | 47.25  | 197.  | 9306.25  |
|           | 798.25 |       | 11260.85 |

$\frac{11260.85}{798.25} = \text{New E.C.G. } \neq 14.10 \text{ " Aft of Datum.}$

Remove Wheel Streamlines - ~~11260.85~~

| Item                    | Weight | Arm   | Moment   |
|-------------------------|--------|-------|----------|
| Aircraft                | 798.25 | 14.10 | 11260.85 |
| Remove Whl. Streamlines | -6.    | + 3.  | - 18.    |
|                         | 792.25 |       | 11242.85 |

$\frac{11242.85}{792.25} = \text{E.C.G. } \neq 14.19 \text{ "}$

Remove Wheels and install Skis.

| Item            | Weight | Arm   | Moment   |
|-----------------|--------|-------|----------|
| Add Wt. of Skis | + 6 #  | 2.6 " | 15.6     |
| Empty Aircraft  | 792.25 | 14.19 | 11242.85 |
|                 | 798.25 |       | 11258.45 |

$\frac{11258.45}{798.25} = \neq 14.10 \text{ "}$

E.W.C.G. falls within pertinent range therefor computation of critical fore & aft positions is unnecessary.

\*If additional space is needed attach additional sheets bearing aircraft nationality and registration mark and date work completed.

Check block if additional sheets are attached. ☐

| U. S. DEPARTMENT OF COMMERCE<br>CIVIL AERONAUTICS ADMINISTRATION   |   | Form Approved. Budget Bureau No. 41-R041.6   |
|--|---|--|
| <b>APPLICATION FOR AIRWORTHINESS CERTIFICATE<br/>AND/OR ANNUAL INSPECTION OF AN AIRCRAFT</b>   |   | <b>INSTRUCTIONS</b><br>Please print or type. Submit this form to the Civil Aeronautics Administration Aviation Safety Field Representative.  |
| <b>1. TYPE OF APPLICATION (Check which)</b>  |   |  |
| <input type="checkbox"/> a. ORIGINAL ISSUANCE OF CERTIFICATE<br><input checked="" type="checkbox"/> b. ANNUAL INSPECTION FOR RENEWAL OF CERTIFICATE<br><input type="checkbox"/> c. AMENDMENT OR MODIFICATION OF CURRENT CERTIFICATE  |   | <input type="checkbox"/> d. RECERTIFICATION UNDER THE PROVISIONS OF CAR 8<br><input type="checkbox"/> e. MULTIPLE CERTIFICATE UNDER THE PROVISIONS OF CAR 8<br><input type="checkbox"/> f. |
| <b>2. AIRWORTHINESS CLASSIFICATION (Check appropriate item(s))</b>   |   |  |
| It is requested that the Certificate of Airworthiness be issued to permit operation of the aircraft in the following airworthiness classification(s):  |   |  |
| <input checked="" type="checkbox"/> a. STANDARD (NORMAL, UTILITY, ACROBATIC, TRANSPORT CATEGORIES)<br><input type="checkbox"/> b. LIMITED (SEE CAR 9)<br><input type="checkbox"/> c. RESTRICTED (SEE CAR 8)  |   |  |
| (Check the restricted special purpose operation(s) to be conducted)  |   |  |
| <input type="checkbox"/> AGRICULTURAL AND PEST CONTROL<br><input type="checkbox"/> AERIAL ADVERTISING<br><input type="checkbox"/> AERIAL SURVEYING<br><input type="checkbox"/> GLIDER TOWING   |   | <input type="checkbox"/> PATROLLING<br><input type="checkbox"/> FOREST AND WILDLIFE CONSERVATION<br><input type="checkbox"/> WEATHER CONTROL<br><input type="checkbox"/> OTHER             |
| <input type="checkbox"/> d. EXPERIMENTAL   |   |  |
| (Check the type of experimental operation(s) to be conducted)  |   |  |
| <input type="checkbox"/> RESEARCH AND DEVELOPMENT<br><input type="checkbox"/> AMATEUR-BUILT<br><input type="checkbox"/> DEMONSTRATION  |   | <input type="checkbox"/> RACING<br><input type="checkbox"/> EXHIBITION<br><input type="checkbox"/> OTHER   |
| <b>3. AIRCRAFT IDENTIFICATION (Complete all items)</b>   |   |  |
| a. AIRCRAFT MAKE<br><i>Piper</i>   | b. AIRCRAFT MODEL<br><i>PA-11</i>   | c. AIRCRAFT SERIAL NO.<br><i>11-372</i>  |
| d. ENGINE MAKE<br><i>Continental</i>   | e. ENGINE MODEL<br><i>H-65-8-F</i>  |  |
| <b>4. AIRCRAFT REGISTRATION INFORMATION (Complete all items)</b>   |   |  |
| a. REGISTERED OWNER'S FULL NAME<br><i>George Frank Haveman</i>   | b. PERMANENT MAILING ADDRESS<br><i>Hornet Acres<br/>Sky Ranch,<br/>Lake City, Mich.</i> | c. AIRCRAFT NATIONALITY AND REGISTRATION MARK<br><i>N-4855M</i>  |
| <b>5. AIRCRAFT OWNER'S CERTIFICATION (Check and complete appropriate item)</b>   |   |  |
| I hereby certify that I am the registered owner (or his agent) of the aircraft identified in Item 3 above which is registered* with the Civil Aeronautics Administration as required by the Regulations of the Administrator, Part 501 or 502 and when operated displays the following evidence of registration:   |   |  |
| <input checked="" type="checkbox"/> a. CERTIFICATE OF REGISTRATION, FORM ACA-500 (PART A); DATE OF ISSUE <i>7-5-1955</i> <i>10-3-52</i><br><input type="checkbox"/> b. APPLICATION FOR REGISTRATION, FORM ACA-500 (PART B); FORM ACA-500, PART A, FORWARDED TO CAA AIRCRAFT RECORDS BRANCH, W-300 ON _____ (DATE)<br><input type="checkbox"/> c. DEALER'S REGISTRATION CERTIFICATE, FORM ACA-1707, DATED _____ |   |  |
| *In order to be eligible for registration an aircraft must be owned by a citizen of the United States, as defined by Section 1 (13) of the Civil Aeronautics Act of 1928, as amended.  |   |  |
| <b>ATTACHMENTS (Check which)</b>   |   |  |
| <input checked="" type="checkbox"/> ACA-519 <input type="checkbox"/> WEIGHT AND BALANCE REPORT<br><input checked="" type="checkbox"/> ACA-337 <input type="checkbox"/> DATA, DRAWINGS, ETC.<br><input type="checkbox"/> ACA-317 <input type="checkbox"/> UNAPPROVED DEVIATION DATA   |   |  |
| <i>George F. Haveman</i><br>(SIGNATURE OF REGISTERED OWNER OR AUTHORIZED AGENT)<br><i>7-5-1955</i><br>(DATE)   |   | <i>Owner</i><br>(TITLE)  |

16-00837-2

FORM ACA-805 (11-51)  
JUL 11 1955

U. S. DEPARTMENT OF COMMERCE  
CIVIL AERONAUTICS ADMINISTRATION

## AIRCRAFT INSPECTION REPORT

(To be completed by a CAA representative or approved repair station)

The aircraft described in Item 3 on the reverse of this form has been inspected and found to conform to the following:  
(Check and complete applicable items)

## 1. AIRCRAFT AND ENGINE CERTIFICATION BASIS

- a. ☒ AIRCRAFT SPECIFICATION NO. 691 THROUGH SHEET REVISION NO. 27  
b. ☐ AIRCRAFT LISTING PAGE NO. \_\_\_\_\_  
c. ☒ AIRWORTHINESS DIRECTIVE SUMMARY 1955 THROUGH CARD NO. 13  
d. ☐ CIVIL AIR REGULATION PART 8 (MODIFIED TYPE CERTIFICATE)

## 2. AIRCRAFT AND ENGINE OPERATING RECORDS

- a. ☐ AIRCRAFT NEW—NO PREVIOUS OPERATION OR MAINTENANCE HISTORY  
b. ☒ COMPLIANCE WITH APPLICABLE AIRWORTHINESS DIRECTIVES RECORDED  
c. ☒ AIRCRAFT RECORDS INDICATE THE AIRFRAME HAS BEEN OPERATED A TOTAL OF 546 HOURS  
d. ☐ ENGINE RECORDS INDICATE THE FOLLOWING OPERATION:  
SERIAL NO. 5977978 TOTAL HOURS 546  
SERIAL NO. \_\_\_\_\_ TOTAL HOURS \_\_\_\_\_  
SERIAL NO. \_\_\_\_\_ TOTAL HOURS \_\_\_\_\_  
SERIAL NO. \_\_\_\_\_ TOTAL HOURS \_\_\_\_\_

## 3. PREVIOUS INSPECTION RECORD (INSPECTION RECORDED ON FORM ACA-319)

- a. LAST AIRWORTHINESS INSPECTION CONDUCTED July 5, 1955 (DATE)  
☐ BY AIRCRAFT MANUFACTURER  
☐ BY APPROVED REPAIR STATION, CERTIFICATE NO. \_\_\_\_\_  
☒ BY MECHANIC, CERTIFICATE NO. 2481234684  
b. ☒ PERIODIC AIRCRAFT INSPECTION REPORT, FORM ACA-319, WAS RETURNED TO OWNER

## 4. AIRWORTHINESS DOCUMENTS ISSUED OR REVIEWED

- a. ☐ OPERATION LIMITATIONS, FORM ACA-309, WAS ISSUED (COPY ATTACHED)  
b. ☐ CURRENT OPERATION LIMITATIONS, FORM ACA-309, IS AVAILABLE IN AIRCRAFT  
c. ☒ CURRENT APPROVED AIRPLANE FLIGHT MANUAL IS AVAILABLE IN AIRCRAFT  
d. ☒ CURRENT WEIGHT AND BALANCE INFORMATION IS AVAILABLE IN AIRCRAFT  
e. ☒ THIS INSPECTION HAS BEEN RECORDED IN THE AIRCRAFT RECORDS  
f. ☒ CERTIFICATE OF AIRWORTHINESS, FORM ACA-1362, ISSUED TO EXPIRE July 5, 1956 (DATE)  
g. ☒ PREVIOUS FORM ACA-1362 WAS ISSUED TO EXPIRE July 5, 1955 (DATE)  
BY R.W. Vandewater (NAME OF ISSUING REPRESENTATIVE) 3323 (DESIGNATION NO.)

## 5. CAA APPROVED REPAIR STATION CERTIFICATION

The aircraft described on the reverse has been inspected under the authority accorded certificated repair station No. \_\_\_\_\_ by CAR 52 and was found to be:

- ☐ AIRWORTHY  
☐ UNAIRWORTHY

(REPAIR STATION AUTHORIZED SIGNATURE)

(DATE)

## 6. CAA REPRESENTATIVE CERTIFICATION

I HAVE INSPECTED THE AIRCRAFT DESCRIBED ON THE REVERSE AND FOUND IT ☒ AIRWORTHY ☐ UNAIRWORTHY  
(Check appropriate item)

DESIGNEE'S SIGNATURE

R.W. Vandewater

AVIATION SAFETY AGENT'S SIGNATURE

Roy P. Williams☐ ATTACHMENT

DESIGNATION NO.

3323

CAA DESIGNATION NO.

KC-257-8

DATE

7-5-55

DATE

7-12-55

- ☐ ACCEPTED  
☐ REINSPECTED  
☒ SPOT CHECKED

Reg. 3 KC  
ASDO 8

| U. S. DEPARTMENT OF COMMERCE<br>CIVIL AERONAUTICS ADMINISTRATION   |   | Form Approved. Budget Bureau No. 41-20415.  |
|--|---|---|
| <b>APPLICATION FOR AIRWORTHINESS CERTIFICATE<br/>AND/OR ANNUAL INSPECTION OF AN AIRCRAFT</b>   |   | <b>INSTRUCTIONS</b><br>Please print or type. Submit this form to the<br>Civil Aeronautics Administration Aviation Safety<br>Field Representative. |
| <b>1. TYPE OF APPLICATION (Check which)</b>  |   |   |
| <input type="checkbox"/> a. ORIGINAL ISSUANCE OF CERTIFICATE   |   |   |
| <input checked="" type="checkbox"/> b. ANNUAL INSPECTION FOR RENEWAL OF CERTIFICATE  |   |   |
| <input type="checkbox"/> c. AMENDMENT OR MODIFICATION OF CURRENT CERTIFICATE   |   |   |
| <input type="checkbox"/> d. RECERTIFICATION UNDER THE PROVISIONS OF CAR 8  |   |   |
| <input type="checkbox"/> e. MULTIPLE CERTIFICATE UNDER THE PROVISIONS OF CAR 8   |   |   |
| <input type="checkbox"/> f. OTHER  |   |   |
| <b>2. AIRWORTHINESS CLASSIFICATION (Check appropriate item(s))</b><br>It is requested that the Certificate of Airworthiness be issued to permit operation of the aircraft in the following air-<br>worthiness classification(s):   |   |   |
| <input checked="" type="checkbox"/> a. STANDARD (NORMAL, UTILITY, ACROBATIC, TRANSPORT-CATEGORIES)   |   |   |
| <input type="checkbox"/> b. LIMITED (SEE CAR 9)  |   |   |
| <input type="checkbox"/> c. RESTRICTED (SEE CAR 8)   |   |   |
| (Check the restricted special purpose operation(s) to be conducted)  |   |   |
| <input type="checkbox"/> AGRICULTURAL AND PEST CONTROL   |   |   |
| <input type="checkbox"/> AERIAL ADVERTISING  |   |   |
| <input type="checkbox"/> AERIAL SURVEYING  |   |   |
| <input type="checkbox"/> GLIDER TOWING   |   |   |
| <input type="checkbox"/> PATROLLING  |   |   |
| <input type="checkbox"/> FOREST AND WILDLIFE CONSERVATION  |   |   |
| <input type="checkbox"/> WEATHER CONTROL   |   |   |
| <input type="checkbox"/> OTHER   |   |   |
| <input type="checkbox"/> d. EXPERIMENTAL   |   |   |
| (Check the type of experimental operation(s) to be conducted)  |   |   |
| <input type="checkbox"/> RESEARCH AND DEVELOPMENT  |   |   |
| <input type="checkbox"/> AMATEUR-BUILT   |   |   |
| <input type="checkbox"/> DEMONSTRATION   |   |   |
| <input type="checkbox"/> RACING  |   |   |
| <input type="checkbox"/> EXHIBITION  |   |   |
| <input type="checkbox"/> OTHER   |   |   |
| <b>3. AIRCRAFT IDENTIFICATION (Complete all items)</b>   |   |   |
| a. AIRCRAFT MAKE   | b. AIRCRAFT MODEL                         | c. AIRCRAFT SERIAL NO.  |
| PIPER  | PA-11                                     | 11-372  |
| d. ENGINE MAKE   | e. ENGINE MODEL                           |   |
| CONTINENTAL  | A-65-8F                                   |   |
| <b>4. AIRCRAFT REGISTRATION INFORMATION (Complete all items)</b>   |   |   |
| a. REGISTERED OWNER'S FULL NAME  | b. PERMANENT MAILING ADDRESS              | c. AIRCRAFT NATIONALITY<br>AND REGISTRATION MARK  |
| George Frank Haveman   | Home Acres Airport<br>Lake City, Michigan | N- 4865M  |
| <b>5. AIRCRAFT OWNER'S CERTIFICATION (Check and complete appropriate item)</b><br>I hereby certify that I am the registered owner (or his agent) of the aircraft identified in Item 3 above which is<br>registered* with the Civil Aeronautics Administration as required by the Regulations of the Administrator, Part 501<br>or 502 and when operated displays the following evidence of registration: |   |   |
| <input checked="" type="checkbox"/> a. CERTIFICATE OF REGISTRATION, FORM ACA-500 (PART A), DATE OF ISSUE <u>Oct. 3rd. 1952</u>   |   |   |
| <input type="checkbox"/> b. APPLICATION FOR REGISTRATION, FORM ACA-500 (PART B), FORM ACA-500, PART A, FORWARDED TO CAA AIRCRAFT RECORDS BRANCH,<br>W-300 ON _____   |   |   |
| <input type="checkbox"/> c. DEALER'S REGISTRATION CERTIFICATE, FORM ACA-1707, DATED _____  |   |   |
| *In order to be eligible for registration an aircraft must be<br>owned by a citizen of the United States, as defined by Section<br>1 (13) of the Civil Aeronautics Act of 1926, as amended.  |   |   |
| <b>ATTACHMENTS (Check which)</b>   |   |   |
| <input checked="" type="checkbox"/> ACA-319  |   |   |
| <input checked="" type="checkbox"/> WEIGHT AND BALANCE REPORT  |   |   |
| <input checked="" type="checkbox"/> ACA-337  |   |   |
| <input checked="" type="checkbox"/> DATA, DRAWINGS, ETC.   |   |   |
| <input type="checkbox"/> ACA-317   |   |   |
| <input type="checkbox"/> UNAPPROVED DEVIATION DATA   |   |   |
| George S. Haveman<br>(SIGNATURE OF REGISTERED OWNER OR AUTHORIZED AGENT)   |   |   |
| July 1st. 1954<br>(DATE)   |   |   |
| Durner<br>(TITLE)  |   |   |

JUL 26 1954



DATE: 3-5-85

U. S. DEPARTMENT OF COMMERCE  
CIVIL AERONAUTICS ADMINISTRATION

AIRCRAFT INSPECTION REPORT

(To be completed by a CAA representative or approved repair station)

The aircraft described in Item 3 on the reverse of this form has been inspected and found to conform to the following:  
(Check and complete applicable items)

1. AIRCRAFT AND ENGINE CERTIFICATION BASIS

- a. ☒ AIRCRAFT SPECIFICATION NO. 691 THROUGH SHEET REVISION NO. 25  
b. ☐ AIRCRAFT LISTING PAGE NO. \_\_\_\_\_  
c. ☒ AIRWORTHINESS DIRECTIVE SUMMARY 1954 THROUGH CARD NO. 12  
d. ☐ CIVIL AIR REGULATION PART 8 (MODIFIED TYPE CERTIFICATE)

2. AIRCRAFT AND ENGINE OPERATING RECORDS

- a. ☐ AIRCRAFT NEW—NO PREVIOUS OPERATION OR MAINTENANCE HISTORY  
b. ☒ COMPLIANCE WITH APPLICABLE AIRWORTHINESS DIRECTIVES RECORDED  
c. ☒ AIRCRAFT RECORDS INDICATE THE AIRFRAME HAS BEEN OPERATED A TOTAL OF 352 HOURS  
d. ☒ ENGINE RECORDS INDICATE THE FOLLOWING OPERATION:  
SERIAL NO. 5977978 TOTAL HOURS 352  
SERIAL NO. \_\_\_\_\_ TOTAL HOURS \_\_\_\_\_  
SERIAL NO. \_\_\_\_\_ TOTAL HOURS \_\_\_\_\_  
SERIAL NO. \_\_\_\_\_ TOTAL HOURS \_\_\_\_\_

3. PREVIOUS INSPECTION RECORD (INSPECTION RECORDED ON FORM ACA-319)

- a. LAST AIRWORTHINESS INSPECTION CONDUCTED 7-1-54 (DATE)  
☐ BY AIRCRAFT MANUFACTURER  
☐ BY APPROVED REPAIR STATION, CERTIFICATE NO. \_\_\_\_\_  
☒ BY MECHANIC, CERTIFICATE NO. 0161234684  
b. ☒ PERIODIC AIRCRAFT INSPECTION REPORT, FORM ACA-319, WAS RETURNED TO OWNER

4. AIRWORTHINESS DOCUMENTS ISSUED OR REVIEWED

- a. ☐ OPERATION LIMITATIONS, FORM ACA-309, WAS ISSUED (COPY ATTACHED)  
b. ☒ CURRENT OPERATION LIMITATIONS, FORM ACA-309, IS AVAILABLE IN AIRCRAFT  
c. ☒ CURRENT APPROVED AIRPLANE FLIGHT MANUAL IS AVAILABLE IN AIRCRAFT  
d. ☒ CURRENT WEIGHT AND BALANCE INFORMATION IS AVAILABLE IN AIRCRAFT  
e. ☒ THIS INSPECTION HAS BEEN RECORDED IN THE AIRCRAFT RECORDS  
f. ☒ CERTIFICATE OF AIRWORTHINESS, FORM ACA-1362, ISSUED TO EXPIRE July 5, 1955 (DATE)  
g. ☒ PREVIOUS FORM ACA-1362 WAS ISSUED TO EXPIRE March 20, 1954 (DATE)  
BY Stanley B. Long (NAME OF ISSUING REPRESENTATIVE) 3278 (DESIGNATION NO.)

5. CAA APPROVED REPAIR STATION CERTIFICATION

The aircraft described on the reverse has been inspected under the authority accorded certificated repair station No. \_\_\_\_\_ by CAR 52 and was found to be:

- ☐ AIRWORTHY  
☐ UNAIRWORTHY

(REPAIR STATION AUTHORIZED SIGNATURE)

(DATE)

6. CAA REPRESENTATIVE CERTIFICATION

I HAVE INSPECTED THE AIRCRAFT DESCRIBED ON THE REVERSE AND FOUND IT ☒ AIRWORTHY ☐ UNAIRWORTHY  
(Check appropriate item)

DESIGNER'S SIGNATURE  
Robert W. Vandewater  
AVIATION SAFETY AGENT'S SIGNATURE

DESIGNATION NO.  
3323

DATE

7/5/54

CAA DESIGNATION NO.

DATE

KC-257-8

8-11-54

- ☒ ACCEPTED  
☐ REINSPECTED  
☐ SPOT CHECKED

☐ ATTACHMENT

JUL 26 1954



| U. S. DEPARTMENT OF COMMERCE<br>CIVIL AERONAUTICS ADMINISTRATION  |  |                |  | Form approved.<br>Budget Bureau No. 41-R082.4 |                       |
|---|--|----------------|--|---|-----------------------|
| MAJOR REPAIR AND ALTERATION FORM (AIRFRAME, POWERPLANT, PROPELLER OR APPLIANCE)   |  |                |  |   |                       |
| 1. AIRCRAFT   | MAKE<br>PIPER                                      | MODEL<br>PA-11 | SERIAL NO.<br>11-372   | NATIONALITY AND REGISTRATION MARK<br>N4655M   |                       |
| 2. OWNER  | NAME (First, middle, last)<br>George Frank Haveman |                | ADDRESS (Street and number, city, zone and State)<br>HOME ACRES AIRPORT<br>Lake City, Michigan   |   |                       |
| 3. COMPLETE ONLY FOR UNIT REPAIRED AND/OR ALTERED. DESCRIBE WORK ACCOMPLISHED ON REVERSE IN ACCORDANCE WITH CIVIL AERONAUTICS MANUAL 18.  |  |                |  |   |                       |
| UNIT  | MAKE   | MODEL          | SERIAL NO.   | NATURE OF WORK (Check)                        |                       |
|   |  |                |  | MAJOR REPAIR                                  | MAJOR ALTERATION      |
| a. AIRFRAME   | ***** (As described in item 1 above) *****         |                |  | X   |                       |
| b. POWERPLANT   |  |                |  |   |                       |
| c. PROPELLER  |  |                |  |   |                       |
| d. APPLIANCE  | TYPE AND MANUFACTURER                              |                |  |   |                       |
| 4. AIRCRAFT WEIGHT AND BALANCE DATA This item must be completed by repair or alteration agency. However, in the case of a spare component, it will not be completed until such component is installed in an aircraft. At this time, it will be completed by the installing agency, if applicable.   |  |                |  |   |                       |
| CATEGORY  | EMPTY WEIGHT (Pounds)*                             |                | EMPTY CENTER OF GRAVITY (Inches from datum)*   |   | USEFUL LOAD (Pounds)* |
| Standard  | Land   | 734            | 16.3   |   | 486                   |
|   | Ski  | 740            | 16.2   |   | 480                   |
| 5. CONFORMITY STATEMENT (Complete and check)  |  |                |  |   |                       |
| a. AGENCY'S NAME AND ADDRESS  |  |                | b. KIND OF AGENCY  |   | c. CERTIFICATE NO.    |
| George F. Haveman<br>HOME ACRES AIRPORT<br>Lake City, Michigan  |  |                | <input checked="" type="checkbox"/> U. S. Certified Mechanic.<br><input type="checkbox"/> Foreign Certified Mechanic.<br><input type="checkbox"/> Certified Repair Station.<br><input type="checkbox"/> Manufacturer.<br><input type="checkbox"/> (Check if repair or alteration was made under delegation option procedures.) |   | A + B<br>1234684      |
| d. I certify that the repair and/or alteration made to the unit(s) identified under item 3 above and described on the reverse or attachments hereto have been made in accordance with the requirements of Part 18 of the U. S. Civil Air Regulations and that the information furnished herein is true and correct to the best of my knowledge.   |  |                |  |   |                       |
| July 1. 1954<br>(Date repair and/or alteration completed)   |  |                | George F. Haveman<br>(Signature of authorized individual)  |   |                       |
| 6. APPROVAL FOR RETURN TO SERVICE (Check and complete appropriate items)  |  |                |  |   |                       |
| Pursuant to the authority specified below the unit identified in item 3 was inspected in the manner prescribed by the Administrator and is  |  |                |  |   |                       |
| <input checked="" type="checkbox"/> APPROVED } BY { <input checked="" type="checkbox"/> CAA Designee <input type="checkbox"/> Manufacturer <input type="checkbox"/> Canadian Department of Transport Inspector of Aircraft<br><input type="checkbox"/> REJECTED } <input type="checkbox"/> CAA Aviation Safety Agent <input type="checkbox"/> Repair Station <input type="checkbox"/> Other (Specify) |  |                |  |   |                       |
| July 5, 1954<br>(Date of approval or rejection)   |  |                | R. W. Vande Water DAMI 3323<br>(Signature of authorized individual; title or identification number)  |   |                       |
| 7. TO BE COMPLETED ONLY BY CAA PERSONNEL  |  |                |  |   |                       |
| a. <input type="checkbox"/> Forwarded for engineering comment <input type="checkbox"/> See attached memorandum  |  |                |  |   |                       |
| b. <input checked="" type="checkbox"/> Accepted <u>6-11-54</u> (Date) <input type="checkbox"/> Reinspected (Date) <input type="checkbox"/> Spot Checked (Date)  |  |                |  |   |                       |
| KC-257-8<br>(CAA designation number)  |  |                | Roy Paulham<br>(Signature Aviation Safety Agent)   |   |                       |

DATE: 3-5-85

## INSTRUCTIONS

This form must be completed in duplicate each time a major repair and/or alteration is made of an aircraft, airframe, power-plant, propeller or appliance. After the repair and/or alteration has been inspected and item 6 completed, the original copy of this form will be made available to the aircraft owner for retention as part of the aircraft records. The duplicate copy is retained by the CAA for administrative purposes.

See CAM 18 for detailed instructions concerning the information to be furnished with this form and instructions concerning its preparation.

### 8. DESCRIPTION OF WORK ACCOMPLISHED.

Welded two 7/8" diameter X .049" wall thickness chrome moly tubes (sleeves) with fish mouth and rosett welds on cabane struts from approximately four inches below main spar fitting cluster wald to approximately ten inches below the same point.

Refinished, primed and enameled all tubeing in aircraft structure.

Spliced in new nose sections on all full ribs except butt rib which was replaced with new rib.

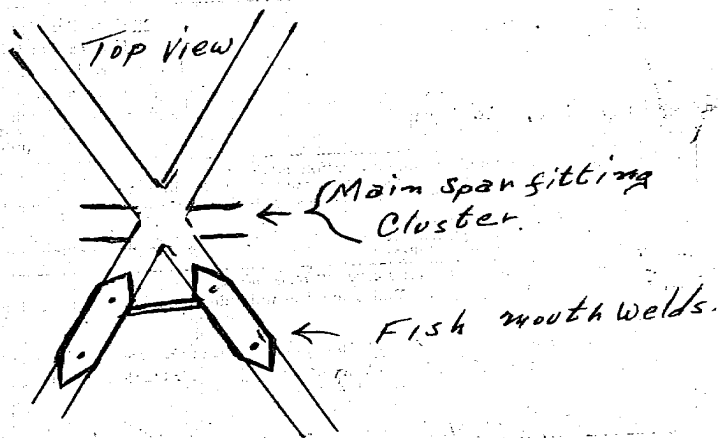
Replaced all false ribs with new ribs.

Recovered entire aircraft with Irish Linen and Butyrate dope.

It is certified that all work has been accomplished in compliance with rules and regulations as set forth in manual #18 of Civil Air Regulations.

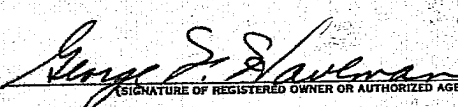
RECEIVED

AUG 17 12 08 PM '85  
ADMIN. & RECORDS SECTION  
N-300



\*If additional space is needed attach additional sheets bearing aircraft nationality and registration mark and date work completed.  
Check block if additional sheets are attached. ☐

APR 8 1953

| U.S. DEPARTMENT OF COMMERCE<br>CIVIL AERONAUTICS ADMINISTRATION  |  | Form Approved, Budget Bureau No. 41-B041.6  |   |
|--|--|---|---|
| <b>APPLICATION FOR AIRWORTHINESS CERTIFICATE<br/>AND/OR ANNUAL INSPECTION OF AN AIRCRAFT</b>   |  | <b>INSTRUCTIONS</b><br>Please print or type. Submit this form to the Civil Aeronautics Administration Aviation Safety Field Representative. |   |
| <b>1. TYPE OF APPLICATION (Check which)</b>  |  |   |   |
| <input type="checkbox"/> a. ORIGINAL ISSUANCE OF CERTIFICATE   |  | <input type="checkbox"/> d. RECERTIFICATION UNDER THE PROVISIONS OF CAR 8   |   |
| <input checked="" type="checkbox"/> b. ANNUAL INSPECTION FOR RENEWAL OF CERTIFICATE  |  | <input type="checkbox"/> e. MULTIPLE CERTIFICATE UNDER THE PROVISIONS OF CAR 8  |   |
| <input type="checkbox"/> c. AMENDMENT OR MODIFICATION OF CURRENT CERTIFICATE   |  | <input type="checkbox"/> f.   |   |
| <b>2. AIRWORTHINESS CLASSIFICATION (Check appropriate item(s))</b><br>It is requested that the Certificate of Airworthiness be issued to permit operation of the aircraft in the following airworthiness classification(s):  |  |   |   |
| <input checked="" type="checkbox"/> a. STANDARD (NORMAL, UTILITY, ACROBATIC, TRANSPORT CATEGORIES)   |  |   |   |
| <input type="checkbox"/> b. LIMITED (SEE CAR 9)  |  |   |   |
| <input type="checkbox"/> c. RESTRICTED (SEE CAR 8)<br>(Check the restricted special purpose operation(s) to be conducted)  |  |   |   |
| <input type="checkbox"/> AGRICULTURAL AND PEST CONTROL   |  | <input type="checkbox"/> PATROLLING   |   |
| <input type="checkbox"/> AERIAL ADVERTISING  |  | <input type="checkbox"/> FOREST AND WILDLIFE CONSERVATION   |   |
| <input type="checkbox"/> AERIAL SURVEYING  |  | <input type="checkbox"/> WEATHER CONTROL  |   |
| <input type="checkbox"/> GLIDER TOWING   |  | <input type="checkbox"/> OTHER  |   |
| <input type="checkbox"/> d. EXPERIMENTAL<br>(Check the type of experimental operation(s) to be conducted)  |  |   |   |
| <input type="checkbox"/> RESEARCH AND DEVELOPMENT  |  | <input type="checkbox"/> RACING   |   |
| <input type="checkbox"/> AMATEUR-BUILT   |  | <input type="checkbox"/> EXHIBITION   |   |
| <input type="checkbox"/> DEMONSTRATION   |  | <input type="checkbox"/> OTHER  |   |
| <b>3. AIRCRAFT IDENTIFICATION (Complete all items)</b>   |  |   |   |
| a. AIRCRAFT MAKE<br>Piper  |  | b. AIRCRAFT MODEL<br>PA-11  | c. AIRCRAFT SERIAL NO.<br>11-372                            |
| d. ENGINE MAKE<br>Continental  |  | e. ENGINE MODEL<br>A-65-8F  |   |
| <b>4. AIRCRAFT REGISTRATION INFORMATION (Complete all items)</b>   |  |   |   |
| a. REGISTERED OWNER'S FULL NAME<br>George F. Haveman   |  | b. PERMANENT MAILING ADDRESS<br>8300 Pontiac Lake Rd.<br>Pontiac Mich.  | c. AIRCRAFT NATIONALITY<br>AND REGISTRATION MARK<br>N-4855M |
| <b>5. AIRCRAFT OWNER'S CERTIFICATION (Check and complete appropriate item)</b><br>I hereby certify that I am the registered owner (or his agent) of the aircraft identified in Item 3 above which is registered* with the Civil Aeronautics Administration as required by the Regulations of the Administrator, Part 501 or 502 and when operated displays the following evidence of registration: |  |   |   |
| <input checked="" type="checkbox"/> a. CERTIFICATE OF REGISTRATION, FORM ACA-500 (PART A). DATE OF ISSUE <u>Oct. 3, 1952</u>   |  |   |   |
| <input type="checkbox"/> b. APPLICATION FOR REGISTRATION, FORM ACA-500 (PART B). FORM ACA-500, PART A, FORWARDED TO CAA AIRCRAFT RECORDS BRANCH, W-300 ON _____ (DATE)   |  |   |   |
| <input type="checkbox"/> c. DEALER'S REGISTRATION CERTIFICATE, FORM ACA-1707, DATED _____  |  |   |   |
| *In order to be eligible for registration an aircraft must be owned by a citizen of the United States, as defined by Section 1 (13) of the Civil Aeronautics Act of 1938, as amended.  |  |   |   |
| <b>ATTACHMENTS (Check which)</b>   |  | <br>(SIGNATURE OF REGISTERED OWNER OR AUTHORIZED AGENT) |   |
| <input checked="" type="checkbox"/> ACA-319  |  | <input type="checkbox"/> WEIGHT AND BALANCE REPORT  |   |
| <input type="checkbox"/> ACA-337   |  | <input type="checkbox"/> DATA, DRAWINGS, ETC.   |   |
| <input type="checkbox"/> ACA-317   |  | <input type="checkbox"/> UNAPPROVED DEVIATION DATA  |   |
| March 29, 1953<br>(DATE)   |  | Owner<br>(TITLE)  |   |

U.S. DEPARTMENT OF COMMERCE  
CIVIL AERONAUTICS ADMINISTRATION  
**AIRCRAFT INSPECTION REPORT**  
(To be completed by CAA representative or approved repair station)

The aircraft described in Item 3 on the reverse of this form has been inspected and found to conform to the following:  
(Check and complete applicable items)

1. AIRCRAFT AND ENGINE CERTIFICATION BASIS

a. ☒ AIRCRAFT SPECIFICATION NO. A-691 THROUGH SHEET REVISION NO. 20

b. ☐ AIRCRAFT LISTING PAGE NO. \_\_\_\_\_

c. ☒ AIRWORTHINESS DIRECTIVE SUMMARY 1952 THROUGH CARD NO. 63-6

d. ☒ CIVIL AIR REGULATION PART 8 (MODIFIED TYPE CERTIFICATE)

2. AIRCRAFT AND ENGINE OPERATING RECORDS

a. ☐ AIRCRAFT NEW—NO PREVIOUS OPERATION OR MAINTENANCE HISTORY

b. ☒ COMPLIANCE WITH APPLICABLE AIRWORTHINESS DIRECTIVES RECORDED

c. ☒ AIRCRAFT RECORDS INDICATE THE AIRFRAME HAS BEEN OPERATED A TOTAL OF 349:35 HOURS

d. ☒ ENGINE RECORDS INDICATE THE FOLLOWING OPERATION:

|                           |                           |
|---------------------------|---------------------------|
| SERIAL NO. <u>5977978</u> | TOTAL HOURS <u>349:35</u> |
| SERIAL NO. _____          | TOTAL HOURS _____         |
| SERIAL NO. _____          | TOTAL HOURS _____         |
| SERIAL NO. _____          | TOTAL HOURS _____         |

3. PREVIOUS INSPECTION RECORD (INSPECTION RECORDED ON FORM ACA-319)

a. LAST AIRWORTHINESS INSPECTION CONDUCTED March 29, 1953  
(DATE)

☐ BY AIRCRAFT MANUFACTURER

☒ BY APPROVED REPAIR STATION, CERTIFICATE NO. \_\_\_\_\_

☒ BY MECHANIC, CERTIFICATE NO. A&E 1234684

b. ☒ PERIODIC AIRCRAFT INSPECTION REPORT, FORM ACA-319, WAS RETURNED TO OWNER

4. AIRWORTHINESS DOCUMENTS ISSUED OR REVIEWED

a. ☐ OPERATION LIMITATIONS, FORM ACA-309, WAS ISSUED (COPY ATTACHED)

b. ☒ CURRENT OPERATION LIMITATIONS, FORM ACA-309, IS AVAILABLE IN AIRCRAFT

c. ☐ CURRENT APPROVED AIRPLANE FLIGHT MANUAL IS AVAILABLE IN AIRCRAFT

d. ☒ CURRENT WEIGHT AND BALANCE INFORMATION IS AVAILABLE IN AIRCRAFT

e. ☒ THIS INSPECTION HAS BEEN RECORDED IN THE AIRCRAFT RECORDS

f. ☒ CERTIFICATE OF AIRWORTHINESS, FORM ACA-132, ISSUED TO EXPIRE March 29, 1954

g. ☒ PREVIOUS FORM ACA-132 WAS ISSUED TO EXPIRE March 27, 1953

BY E.H. Quick (NAME OF ISSUING REPRESENTATIVE) (DATE) 3-5-53 (DESIGNATION NO.)

5. CAA APPROVED REPAIR STATION CERTIFICATION

The aircraft described on the reverse has been inspected under the authority recorded certified repair station No. \_\_\_\_\_ by CAR 52 and was found to be:

☐ AIRWORTHY

☐ UNAIRWORTHY

(REPAIR STATION AUTHORIZED SIGNATURE) \_\_\_\_\_ (DATE) \_\_\_\_\_

6. CAA REPRESENTATIVE CERTIFICATION

I HAVE INSPECTED THE AIRCRAFT DESCRIBED ON THE REVERSE AND FOUND IT ☒ AIRWORTHY ☐ UNAIRWORTHY  
(Check appropriate item)

|  |  |                               |
|--|--|-------------------------------|
| DESIGNER'S SIGNATURE<br><u>Stanley E. Love</u>       | DESIGNATION NO.<br><u>3278</u>         | DATE<br><u>March 29, 1953</u> |
| AVIATION SAFETY AGENT'S SIGNATURE<br><u>H. Backa</u> | CAA DESIGNATION NO.<br><u>3-5794-3</u> | DATE<br><u>4/6/53</u>         |

☒ ACCEPTED

☐ REINSPECTED

☐ SPOT CHECKED

☐ ATTACHMENT

DATE: 3-5-85

|   |  |  |  |  |  |
|---|--|--|--|--|--|
| Form ACA-305<br>(11-40)   |  | DEPARTMENT OF COMMERCE<br>CIVIL AERONAUTICS ADMINISTRATION   |  | Form Approved FEB 7 1952<br>Budget Bureau No. 41-B-241.4   |  |
| APPLICATION FOR AIRWORTHINESS CERTIFICATE<br>AND/OR ANNUAL INSPECTION OF AN AIRCRAFT  |  |  |  | INSTRUCTIONS<br>Please submit this form to the Civil Aeronautics Administration Aviation Safety Field Representative |  |
| 1. APPLICATION (CHECK WHETHER)<br><input type="checkbox"/> ORIGINAL AIRWORTHINESS CERTIFICATE<br><input checked="" type="checkbox"/> ANNUAL INSPECTION  |  | 2. AIRWORTHINESS CLASSIFICATION<br><input checked="" type="checkbox"/> STANDARD <input type="checkbox"/> RESTRICTED<br><input type="checkbox"/> EXPERIMENTAL <input type="checkbox"/> LIMITED <input type="checkbox"/> OTHER |  |  |  |
| 3. MAKE<br>Piper  |  |  |  | 5. NATIONALITY AND REGISTRATION MARK<br>N 4855M  |  |
| 4. MODEL<br>PA-11   |  |  |  | 6. MANUFACTURER'S SERIAL NO.<br>11-372   |  |
| 7. MAKE<br>Continental  |  | 8. MODEL<br>A-65-8F  |  |  |  |
| 9. OWNER'S NAME<br>Edward A. McKulsky   |  | 10. (GIVE ADDRESS ONLY IF IT HAS BEEN CHANGED FROM THAT GIVEN ON YOUR CERTIFICATE OF REGISTRATION, FORM ACA-500)   |  |  |  |
| 11. ATTACHMENTS (CHECK WHICH)<br><input checked="" type="checkbox"/> ACA-319 <input type="checkbox"/> WEIGHT AND BALANCE REPORT<br><input checked="" type="checkbox"/> ACA-337 <input type="checkbox"/> DATA, DRAWINGS, ETC.<br><input type="checkbox"/> ACA-317 <input type="checkbox"/> UNAPPROVED DEVIATION DATA |  | 12. I CERTIFY that the above statements are true:<br><br>Jan. 27-1952 (DATE)<br>Agent (TITLE)  |  |  |  |
| Form ACA-305a<br>(11-40)  |  |  |  |  |  |
| AIRCRAFT INSPECTION REPORT<br>(To be completed by CAA representatives)  |  |  |  |  |  |
| 13. It has been determined that the aircraft described in 305 above is in conformity with the following:<br>(CHECK AND COMPLETE APPLICABLE ITEMS)   |  |  |  |  |  |
| a. <input checked="" type="checkbox"/> AIRCRAFT SPECIFICATION NO. A-691 THROUGH SHEET REVISION NO. 18   |  |  |  |  |  |
| b. <input type="checkbox"/> AIRCRAFT LISTING PAGE NO. 1951 THROUGH CARD NO. 52-2  |  |  |  |  |  |
| c. <input checked="" type="checkbox"/> AIRWORTHINESS DIRECTIVE SUMMARY 1951   |  |  |  |  |  |
| d. <input type="checkbox"/> OPERATIONS LIMITATIONS FORM ACA-308 IS AVAILABLE IN AIRCRAFT.   |  |  |  |  |  |
| e. <input checked="" type="checkbox"/> OPERATIONS LIMITATIONS FORM ACA-308 IS AVAILABLE IN AIRCRAFT.  |  |  |  |  |  |
| f. <input type="checkbox"/> CURRENT, APPROVED, AIRPLANE FLIGHT MANUAL IS AVAILABLE IN AIRCRAFT.   |  |  |  |  |  |
| g. <input checked="" type="checkbox"/> ALL APPLICABLE NOTES, INSTRUMENT MARKINGS, AND PLACARDS HAVE BEEN COMPLIED WITH.   |  |  |  |  |  |
| h. <input checked="" type="checkbox"/> CERTIFICATE OF AIRWORTHINESS FORM ACA-1362 WAS ISSUED.   |  |  |  |  |  |
| FINDINGS  |  |  |  |  |  |
| 14. <input checked="" type="checkbox"/> AIRWORTHY<br><input type="checkbox"/> UNAIRWORTHY   |  | 15. PERSON'S SIGNATURE<br>E.H. Quick   |  | 16. DESIGNATION NO.<br>397   |  |
|   |  | 18. AVIATION SAFETY AGENT'S SIGNATURE<br>[Signature]   |  | 17. DATE<br>Jan. 27-1958   |  |
|   |  |  |  | 19. <input checked="" type="checkbox"/> ACCEPTED<br><input type="checkbox"/> REINSPECTED                             |  |
|   |  |  |  | 20. DATE<br>2/8/52   |  |
| 21. REASON FOR DISAPPROVAL OR REMARKS (INDICATE IF YOU HAVE USED THE REVERSE TO CONTINUE THIS OR OTHER ITEM) <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO  |  |  |  |  |  |

DATE: 3-5-85

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CERTIFICATE SECTION  
FEB 20 12 09 PM '57



| Form ACA-887<br>(11-48)   |   | DEPARTMENT OF COMMERCE<br>CIVIL AERONAUTICS ADMINISTRATION                               |  | Form approved<br>Budget Bureau No. 41-R052.S.       |                                     |
|---|---|--|--|---|-------------------------------------|
| <b>REPAIR AND ALTERATION FORM (AIRCRAFT, PROPELLERS, ENGINES, INSTRUMENTS)</b> 1952   |   |  |  |   |                                     |
| (SEE REVERSE SIDE OF THIS FORM FOR INSTRUCTIONS)  |   |  |  |   |                                     |
| 1. AIRCRAFT   | MAKE<br><b>Piper</b>  | MODEL<br><b>PA-11</b>  | SERIAL NO.<br><b>11-372</b>  | NATIONALITY AND REGISTRATION MARK<br><b>N 4855M</b> |                                     |
| 2. OWNER  | NAME (First, middle, last)<br><b>Edward A. McKulsky</b><br>ADDRESS (Street and number, city, zone, and State)<br><b>543 North Silver St.<br/>Bad Axe Michigan</b> |  |  |   |                                     |
| 3. FILL IN INFORMATION IN THIS ITEM ONLY FOR THE UNIT REPAIRED AND/OR ALTERED   |   |  |  |   |                                     |
| UNIT  | MAKE  | MODEL  | SERIAL NO.   | NATURE OF WORK (Check)                              |                                     |
|   |   |  |  | MAJOR REPAIR  | MAJOR ALTERATION                    |
| a. AIRCRAFT   | ***** (As described in item 1 above) *****  |  |  |   | <input checked="" type="checkbox"/> |
| b. PROPELLER<br>BLADE OR<br>HUB   |   |  |  |   |                                     |
| c. ENGINE   |   |  |  |   |                                     |
| d. INSTRUMENT   | TYPE AND MANUFACTURER   |  |  |   |                                     |
| 4. AIRCRAFT   |   |  |  |   |                                     |
| This item must be completed by repair or alteration agency. However, in the case of a spare component, it will not be completed until such component is installed in an aircraft. At this time, it will be completed by the installing agency, if applicable. |   |  |  |   |                                     |
| WEIGHT AND BALANCE DATA   |   |  |  |   |                                     |
| *AFTER the repairs and/or alterations described below were made.  |   | EMPTY WEIGHT (Pounds)*<br><b>Land 734</b><br><b>Sk1 740</b>                              | EMPTY CENTER OF GRAVITY (Inches from datum)*<br><b>+ 16.2</b><br><b>+ 16.2</b> | USEFUL LOAD (Pounds)*<br><b>486</b><br><b>460</b>   |                                     |
| 5. KIND OF AGENCY WHICH MADE REPAIRS AND/OR ALTERATIONS (Check)   |   |  |  |   |                                     |
| <input type="checkbox"/> MANUFACTURER <input type="checkbox"/> APPROVED REPAIR STATION NO. _____ (Specify) <input checked="" type="checkbox"/> CERTIFIED MECHANIC   |   |  |  |   |                                     |
| 6. AGENCY   | NAME<br><b>Glenn L. Welsh Jr.</b>   | ADDRESS (Street and number, city, zone, and State)<br><b>Welsh Airport Vassar, Mich.</b> |  | DATE WORK ACCOMPLISHED<br><b>1/26/52</b>            |                                     |
| 7. DESCRIPTION OF WORK (ALL WORK MUST BE ACCOMPLISHED IN ACCORDANCE WITH PART 18 OF THE CIVIL AIR REGULATIONS AND ITS ASSOCIATED CIVIL AERONAUTICS MANUAL 18.)  |   |  |  |   |                                     |
| <b>Install A-1500 Federal Skis equipment item 810(s) Weight increase 6lbs.</b>  |   |  |  |   |                                     |
| <b>Install navigation lights</b>  |   |  |  |   |                                     |
| <b>Weight and Balance on reverse side</b> <i>am</i>   |   |  |  |   |                                     |
| If more space is needed, continue on reverse, or attach separate sheets bearing aircraft registration mark.   |   |  |  |   |                                     |
| <input type="checkbox"/> FORWARDED FOR ENGINEERING APPROVAL   |   |  |  |   |                                     |
| I CERTIFY that the above statements are true and correct to the best of my knowledge.   |   |  |  |   |                                     |
| <i>Glenn L. Welsh Jr.</i><br>(Signature of supervising mechanic)  |   | <b>A&amp;E 510184</b><br>(Certificate number and rating)                                 |  | <b>1/26/52</b><br>(Date)                            |                                     |
| TO BE COMPLETED BY CAA REPRESENTATIVES  |   |  |  |   |                                     |
| <input checked="" type="checkbox"/> APPROVED  | DESIGNEE'S SIGNATURE<br><i>E. H. Quich</i>  |  | NO.<br><b>397</b>  | DATE<br><b>Jan 27-1952</b>                          |                                     |
| <input type="checkbox"/> REJECTED   | CAA AGENT SIGNATURE<br><i>H. Basler</i>   |  | <input checked="" type="checkbox"/> ACCEPTED                                   | DATE<br><b>2/8/52</b>                               |                                     |
|   |   |  | <input type="checkbox"/> REINSPECTED   |   |                                     |

# Weight & Balance

## LAND

|                    |     |     |       |        |         |
|--------------------|-----|-----|-------|--------|---------|
| Previous empty wt. | 731 | Arm | 16.1  | Moment | 11769.1 |
| Wing lights        | 2   |     | 7.0   |        | 14.0    |
| Tail light         | 1   |     | 189.8 |        | 189.8   |
| New empty wt.      | 734 |     | 16.2  |        | 11972.4 |

New land E.C.G. 16.2

## SKI

|                    |       |     |       |        |         |
|--------------------|-------|-----|-------|--------|---------|
| Previous empty wt. | 731   | Arm | 16.1  | Moment | 11769.1 |
| Wing lights        | 2     |     | 7.0   |        | 14.0    |
| Tail light         | 1     |     | 189.8 |        | 189.8   |
| Wt. increase skis  | 6     |     | 2.6   |        | 15.6    |
| Ski empty wt.      | 740.0 |     | 16.2  |        | 11988.0 |

Ski E.C.G. 16.2

As the E.C.G. falls within the E.C.G. range of 12.8 to 18.3 computation of critical fore and aft positions is unnecessary

1. This form must be filled out in duplicate each time a major repair and/or alteration is made of an aircraft, propeller, engine, or instrument.
2. When repairs and/or alterations are made which affect the operation limitations set forth in the Airplane Flight Manual or Form ACA-309, the aircraft shall not be returned to service until the operation limitations have been corrected by an authorized representative of the CAA.
3. Certificated mechanics must, in all cases, obtain approval of the repair and/or alteration from the CAA representative prior to returning the article to service.
4. The manufacturer of an aircraft, engine, propeller, or instrument, and a certificated repair station holding the appropriate rating may return the article to service without prior approval of an authorized CAA representative, provided the alteration and/or repair does not change any of the operation limitations.
5. Repair agencies will be guided as follows when completing this form.
  - a. For an Aircraft Repair and/or Alteration—Complete Items 1, 2, 3, 4, 5, 6, and 7.
  - b. Mechanic—Submit to CAA representative for inspection and approval prior to returning the article to service. Upon approval, the CAA representative will return the original copy to the mechanic who should submit it to the aircraft owner.
  - c. Manufacturer or Approved Repair Station—Submit original to aircraft owner, forward copy to CAA district office or CAA agent prior to returning article to service.
  - d. For a Component Installed in an Aircraft—Complete Items 1, 2, 3 (b), 4, 5, 6, and 7.
  - e. For a Spare Component—Complete Items 3 (b), 4, 5, 6, and 7.
6. Mechanic—Submit to CAA representative for inspection and approval. When approved, retain both copies of the form with the component until installation on an aircraft. At this time Items 1, 2, and 4 must be completed by the installing agency who will distribute the forms as follows: (No further approval of CAA is required, only a log-book entry by the installing agency is necessary.) After installation, original form should be submitted to aircraft owner, and copy for-warded to the nearest CAA district office or CAA agent.
7. Manufacturer or Approved Repair Station—Handle same as for mechanics except that it is not necessary to submit to CAA representative for inspection or approval.

INSTRUCTIONS



FEB 12 1951

|  |  |  |                          |  |  |
|--|--|--|--------------------------|--|--|
| Form ACA-305<br>(11-49)  |  | DEPARTMENT OF COMMERCE<br>FEDERAL AERONAUTICS ADMINISTRATION   |                          | Form Approved<br>Budget Bureau No. 41-R041.4   |  |
| APPLICATION FOR AIRWORTHINESS CERTIFICATE<br>AND/OR ANNUAL INSPECTION OF AN AIRCRAFT   |  |  |                          | INSTRUCTIONS<br>Please submit this form to the Civil Aeronautics Administration Aviation Safety Field Representative |  |
| 1. APPLICATION (CHECK WHETHER)<br><input type="checkbox"/> ORIGINAL AIRWORTHINESS CERTIFICATE<br><input checked="" type="checkbox"/> ANNUAL INSPECTION   |  | 2. AIRWORTHINESS CLASSIFICATION<br><input checked="" type="checkbox"/> STANDARD <input type="checkbox"/> RESTRICTED<br><input type="checkbox"/> EXPERIMENTAL <input type="checkbox"/> LIMITED <input type="checkbox"/> OTHER |                          |  |  |
| 3. MAKE<br>Piper   |  |  |                          | 5. NATIONALITY AND REGISTRATION MARK<br>N 485FM  |  |
| 4. MODEL<br>PA-11  |  |  |                          | 6. MANUFACTURER'S SERIAL NO.<br>11-372   |  |
| 7. MAKE<br>Continental   |  | 8. MODEL<br>A-65-BF  |                          |  |  |
| 9. OWNER'S NAME<br>Edward A. McNulsky  |  | 10. (GIVE ADDRESS ONLY IF IT HAS BEEN CHANGED FROM THAT GIVEN ON YOUR CERTIFICATE OF REGISTRATION, FORM ACA-500)   |                          |  |  |
| 11. ATTACHMENTS (CHECK WHICH)<br><input checked="" type="checkbox"/> ACA-319 <input type="checkbox"/> WEIGHT AND BALANCE REPORT<br><input type="checkbox"/> ACA-337 <input type="checkbox"/> DATA, DRAWINGS, ETC.<br><input type="checkbox"/> ACA-317 <input type="checkbox"/> UNAPPROVED DEVIATION DATA |  | 12. I CERTIFY that the above statements are true.<br><br>Jan 24-1950 (DATE)<br>Agent (TITLE)   |                          |  |  |
| Form ACA-305a<br>(11-49)   |  |  |                          |  |  |
| AIRCRAFT INSPECTION REPORT<br>(To be completed by CAA representatives)   |  |  |                          |  |  |
| 13. It has been determined that the aircraft described in 305 above is in conformity with the following:<br>(CHECK AND COMPLETE APPLICABLE ITEMS)  |  |  |                          |  |  |
| a. <input checked="" type="checkbox"/> AIRCRAFT SPECIFICATION NO. A621 THROUGH SHEET REVISION NO. 16   |  |  |                          |  |  |
| b. <input type="checkbox"/> AIRCRAFT LISTING PAGE NO.  |  |  |                          |  |  |
| c. <input checked="" type="checkbox"/> AIRWORTHINESS DIRECTIVE SUMMARY 1951 THROUGH CARD NO. 51-3  |  |  |                          |  |  |
| d. <input type="checkbox"/> OPERATIONS LIMITATIONS FORM ACA-309 ISSUED.  |  |  |                          |  |  |
| e. <input checked="" type="checkbox"/> OPERATIONS LIMITATIONS FORM ACA-309 IS AVAILABLE IN AIRCRAFT.   |  |  |                          |  |  |
| f. <input type="checkbox"/> CURRENT, APPROVED, AIRPLANE FLIGHT MANUAL IS AVAILABLE IN AIRCRAFT.  |  |  |                          |  |  |
| g. <input checked="" type="checkbox"/> ALL APPLICABLE NOTES, INSTRUMENT MARKINGS, AND PLACARDS HAVE BEEN COMPLIED WITH.  |  |  |                          |  |  |
| h. <input checked="" type="checkbox"/> CERTIFICATE OF AIRWORTHINESS FORM ACA-1362 WAS ISSUED.  |  |  |                          |  |  |
| FINDINGS   |  |  |                          |  |  |
| 14. <input checked="" type="checkbox"/> AIRWORTHY<br><input type="checkbox"/> UNAIRWORTHY  | 15. DESIGNER'S SIGNATURE<br>B.H. Quick | 16. DESIGNATION NO.<br>397   | 17. DATE<br>Jan. 24-1950 | 18. AVIATION SAFETY AGENT'S SIGNATURE<br>H. Baeh   |  |
|  |  | 19. <input checked="" type="checkbox"/> ACCEPTED<br><input type="checkbox"/> REINSPECTED   | 20. DATE<br>2/11/51      |  |  |
| 21. REASON FOR DISAPPROVAL, OR REMARKS (INDICATE IF YOU HAVE USED THE REVERSE TO CONTINUE THIS OR OTHER ITEM) <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO<br><br>ack<br>3-8-51<br>NW +   |  |  |                          |  |  |

FAA AIRCRAFT REGISTRY  
CAMERA NO. 1

DATE: 3-5-85

DEPT OF COMMERCE  
CIVIL AERONAUTICS ADM.  
FEB 26 10 28 AM '51  
MAIL ROOM - 2  
WASHINGTON

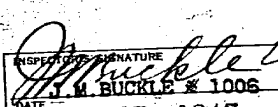
|   |  |  |  |  |  |
|---|--|--|--|--|--|
| <b>Form ACA-305</b><br>(12-47)  |  | DEPARTMENT OF COMMERCE<br>CIVIL AERONAUTICS ADMINISTRATION   |  | FORM APPROVED<br>BUDGET BUREAU NO. 41-R041.3   |  |
| <b>APPLICATION FOR AIRWORTHINESS CERTIFICATE<br/>AND/OR ANNUAL INSPECTION OF AN AIRCRAFT</b>  |  |  |  | <b>INSTRUCTIONS</b><br>Please submit this form to the Civil Aeronautics<br>Administration Field Representative |  |
| <b>APPLICATION (Check whether)</b><br><input type="checkbox"/> ORIGINAL AIRWORTHINESS CERTIFICATE<br><input checked="" type="checkbox"/> ANNUAL INSPECTION  |  | <b>AIRWORTHINESS CLASSIFICATION</b><br><input checked="" type="checkbox"/> STANDARD <input type="checkbox"/> RESTRICTED<br><input type="checkbox"/> EXPERIMENTAL <input type="checkbox"/> LIMITED <input type="checkbox"/> OTHER |  |  |  |
| <b>AIRCRAFT</b>   |  |  |  |  |  |
| <b>MAKE</b><br>PIPER  |  | <b>MODEL</b><br>PA-11  |  | <b>TYPE CERTIFICATE NO.</b><br>691   |  |
| <b>REGISTRATION NO.</b><br>4855M  |  | <b>MANUFACTURER'S SERIAL NO.</b><br>11-372   |  | <b>ENGINE</b><br>6-47  |  |
| <b>MAKE</b><br>CONTINENTAL  |  | <b>MODEL</b><br>A-65-8F  |  | <b>PERMANENT ADDRESS (Street and number, city, zone, and State)</b><br>520 HURON ST.<br>BAD AXE, MICHIGAN.     |  |
| <b>OWNER'S NAME</b><br>GEORGE E. HILL   |  | <b>I CERTIFY that the above statements are true.</b><br><div style="text-align: right;"> <br/>       Owner or authorized agent.     </div>   |  |  |  |
| <b>ATTACHMENTS (Check which)</b><br><input checked="" type="checkbox"/> ACA-319 <input type="checkbox"/> WEIGHT AND BALANCE REPORT<br><input type="checkbox"/> ACA-337 <input type="checkbox"/> DATA, DRAWINGS, ETC.<br><input type="checkbox"/> ACA-317 <input type="checkbox"/> UNAPPROVED DEVIATION DATA |  | <b>12/31/49</b> <b>AGENT</b><br>(DATE) (TITLE)   |  |  |  |
| <b>Form ACA-305a</b>  |  |  |  |  |  |
| <b>AIRCRAFT INSPECTION REPORT</b><br>(To be completed by a CAA inspector or a designated inspector or representative)   |  |  |  |  |  |
| It has been determined that the aircraft described in 305 above is in conformity with the following:  |  |  |  |  |  |
| ALL APPLICABLE MANDATORY NOTES, INSTRUMENT MARKINGS AND PLACARDING REQUIREMENTS HAVE BEEN<br>COMPLIED WITH <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO  |  |  |  |  |  |
| AIRCRAFT SPECIFICATION-AIRWORTHINESS DIRECTIVE NO(S). A-691 THRU REV 10 ADS THRU 49-52<br>(Specify)   |  |  |  |  |  |
| FORM ACA-1362, CERTIFICATE OF AIRWORTHINESS, ISSUED <input type="checkbox"/> ORIGINAL <input checked="" type="checkbox"/> ANNUAL INSPECTION   |  |  |  |  |  |
| (Check whether)<br><input checked="" type="checkbox"/> OPERATION LIMITATIONS FORM ACA-309 <del>IS AVAILABLE</del> IS AVAILABLE IN AIRCRAFT.<br><input type="checkbox"/> APPROVED AIRPLANE FLIGHT MANUAL IS IN THE AIRCRAFT  |  |  |  |  |  |
| <b>FINDINGS</b>   |  |  |  |  |  |
| <input checked="" type="checkbox"/> AIRWORTHY<br><input type="checkbox"/> UNAIRWORTHY   |  | <b>DESIGNEE'S SIGNATURE AND NO.</b><br>CECIL W DAVIS #3242   |  | <b>DATE</b><br>12/31/49  |  |
| <b>CAA INSPECTOR'S SIGNATURE</b><br>  |  | <input checked="" type="checkbox"/> ACCEPTED<br><input type="checkbox"/> REINSPECTED   |  | <b>DATE</b><br>Jan 6, 1950   |  |
| <b>REASON FOR DISAPPROVAL, OR REMARKS (Indicate if you have used the reverse to continue this or other item.)</b><br>ASR #286 COMPLIED WITH.  |  |  |  |  |  |

FAA AIRCRAFT REGISTRY  
CAMERA NO. 1

DATE: 3-5-85

DEPT OF COMMERCE  
CIVIL AERONAUTICS ADM.  
FEB 4 1 14 AM '50  
MAIL ROOM 3  
WASHINGTON

Form ACA-809-PAGE 1 (12-45)

|   |                     |   |                |  |                      |                          |                                     |
|---|---------------------|---|----------------|--|----------------------|--------------------------|-------------------------------------|
| UNIT<br>DE<br>CIVIL   |                     | STATES OF AMER<br>ENT OF COMMER<br>NAUTICS ADMINISTRATION |                | OPERATION LIMITATIONS  |                      | IDENT. MARK<br>NC 4855M  |                                     |
| ENGINE  | MAKE<br>Continental | AIRCRAFT  | MAKE<br>Piper  | DATE MFRD.<br>June 1947  | SERIAL NO.<br>11-372 | DESIGNATION<br>2PCLM     | TYPE CERT.<br>691                   |
|   | MODEL<br>A-65-BF    |   | MODEL<br>PA-11 |  |                      |                          |                                     |
| ENGINE AND AIR SPEED LIMITS NOT TO BE EXCEEDED<br>(All Values Are Maximum and Are NOT RECOMMENDED OPERATING LIMITS) |                     |   |                |  |                      |                          |                                     |
| ENGINE LIMITS   |                     |   |                |  |                      | TRUE INDICATED AIR SPEED |                                     |
|   | MINUTES             | ALTITUDE  | IN. HG.        | R. P. M.   | M. P.                | FUEL OCT.                | M. P. H. LAND KNOTS SEA             |
| TAKE-OFF  | —                   | Any   | —              | 2300   | 65                   | 73Min                    | CLIMB OR LEVEL FLIGHT 90            |
| SEA LEVEL   | X                   | TO  | —              | 2300   | 65                   | 73Min                    | GLIDE OR DIVE (Smooth Air Only) 122 |
| ALTIITUDE   | FROM                | Any   | —              | 2300   | 65                   | 73Min                    | FLAPS EXTENDED None                 |
| *METO—MAXIMUM EXCEPT TAKE-OFF   |                     |   |                |  |                      |                          |                                     |
| TAKE-OFF WEIGHT   |                     |   |                | LANDING WEIGHT   |                      |                          |                                     |
| LAND  | 1220                | SEA   | —              | LAND   | 1220                 | SEA                      | —                                   |
| OPERATIONS AUTHORIZED   |                     |   |                |  |                      |                          |                                     |
| VISUAL CONTACT DAY 2  |                     |   |                | INSPECTOR'S SIGNATURE<br><br>W. M. BUCKLE # 1006<br>DATE June 27, 1947 |                      |                          |                                     |

ADDITIONAL OPERATIONS AUTHORIZED ☐ YES ☒ NO (IF YES—SEE OVER)  
THIS PLACARD MUST BE DISPLAYED IN VIEW OF THE PILOT  
(FOLD HERE)

10-48710-2

**ADDITIONAL OPERATIONS AUTHORIZED**

1350

| TYPE   | CLASS | YR | 3000 | 25 | 1200 | 1000 | 1000 |
|--------|-------|----|------|----|------|------|------|
| REPAIR | ✓     | YR | 3000 | 25 | 1200 | 1000 | 1000 |
| REPAIR | ✓     | YR | 3000 | 25 | 1200 | 1000 | 1000 |
| REPAIR | ✓     | YR | 3000 | 25 | 1200 | 1000 | 1000 |

IF THIS FORM IS LOST OR DESTROYED, A DUPLICATE MAY BE OBTAINED FROM THE CERTIFICATION AND RECORDATION SECTION, AIRCRAFT AND COMPONENTS SERVICE, CIVIL AERONAUTICS ADMINISTRATION, WASHINGTON, D. C., FOR \$2.00. (MONEY ORDER OR CHECK SHOULD BE MADE PAYABLE TO THE TREASURER OF THE UNITED STATES.)

10-60716 U. S. GOVERNMENT PRINTING OFFICE

# REPAIR AND ALTERATION RECORD

|  |               |  |       |
|--|---------------|--|-------|
| REPAIR AND ALTERATION FORM DATED         |               | BY (Agency Name and No.)                           |       |
| LOCATION AND BRIEF DESCRIPTION OF REPAIR |               | DEPARTMENT OF COMMERCE<br>CIVIL AERONAUTICS ADMIN. |       |
| REPAIR AND ALTERATION FORM DATED         |               | BY (Agency Name and No.)                           |       |
| LOCATION AND BRIEF DESCRIPTION OF REPAIR |               | MAIL ROOM-1<br>WASHINGTON                          |       |
| REPAIR AND ALTERATION FORM DATED         |               | BY (Agency Name and No.)                           |       |
| LOCATION AND BRIEF DESCRIPTION OF REPAIR |               |  |       |
| REPAIR AND ALTERATION FORM DATED         |               | BY (Agency Name and No.)                           |       |
| LOCATION AND BRIEF DESCRIPTION OF REPAIR |               |  |       |
| SUPPLEMENTAL<br>PAGE NO.                 | ISSUED (Date) | BY   | TITLE |

REVERSE OF PAGE 2 - FORM ACA-209

16-45710-1 - U. S. GOVERNMENT PRINTING OFFICE

Form ACA-809—Page 2 (12-65)

|  |        |        |                   |                       |                |      |
|--|--------|--------|-------------------|-----------------------|----------------|------|
| UNITED STATES OF AMERICA<br>DEPARTMENT OF COMMERCE<br>CIVIL AERONAUTICS ADMINISTRATION |        |        | SPECIFICATION NO. |                       | CAA IDENT. NO. |      |
| EQUIPMENT No.  |        |        |                   | SPECIAL EQUIPMENT     |                |      |
| NUMBER   | NUMBER | NUMBER | NUMBER            | ITEM (DESCRIPTION)    | WGT.           | ARM. |
|  |        |        |                   |                       |                |      |
|  |        |        |                   |                       |                |      |
|  |        |        |                   |                       |                |      |
|  |        |        |                   |                       |                |      |
|  |        |        |                   |                       |                |      |
|  |        |        |                   |                       |                |      |
| C. G. LIMITS   |        |        |                   |                       |                |      |
| LAND   |        |        | SEA               |                       |                |      |
| DATUM  |        |        |                   | INSPECTOR'S SIGNATURE |                |      |
|  |        |        |                   |                       |                |      |
|  |        |        |                   | DATE                  |                |      |
|  |        |        |                   |                       |                |      |



|  |          |   |                 |  |                 |
|--|----------|---|-----------------|--|-----------------|
| FORM ACA-305<br>13-7-46  |          | DEPARTMENT OF COMMERCE<br>CIVIL AERONAUTICS ADMINISTRATION  |                 | BUDGET BUREAU NO. 41-2041.2<br>APPROVAL EXPIRES FEBRUARY 15, 1947  |                 |
| APPLICATION FOR AIRWORTHINESS CERTIFICATE AND/OR<br>ANNUAL INSPECTION OF AN AIRCRAFT   |          |   |                 | INSTRUCTIONS<br>Please submit this form to the Civil Aero-<br>nautics Administration Field Representative. |                 |
| APPLICATION (Check)<br><input checked="" type="checkbox"/> AIRWORTHINESS CERTIFICATE<br><input type="checkbox"/> ANNUAL INSPECTION   |          | CAA IDENTIFICATION<br><input checked="" type="checkbox"/> NC <input type="checkbox"/> NX <input type="checkbox"/> NR <input type="checkbox"/> OTHER (Specify) _____                 |                 |  |                 |
| AIRCRAFT   |          |   |                 |  |                 |
| MAKE<br>Piper  |          | MODEL<br>PA-11  |                 |  |                 |
| REGISTRATION NO.<br>4855M  |          | MANUFACTURER'S SERIAL NO.<br>11-372   |                 | DATE MANUFACTURED<br>June 1947   |                 |
| ENGINE   |          |   |                 |  |                 |
| MAKE<br>Continental Motors Corporation   |          | MODEL<br>A-65-8F  |                 | RATED H.P.<br>65   |                 |
| (Check whether)<br><input checked="" type="checkbox"/> NEW <input type="checkbox"/> USED <input type="checkbox"/> OVERHAULED   |          | IF OVERHAULED, STATE BY WHOM _____  |                 | DATE OF OVERHAUL _____   |                 |
| (Check which)<br><input type="checkbox"/> AIRCRAFT NOW REGISTERED WITH THE ADMINISTRATION  |          | <input checked="" type="checkbox"/> APPLICATION FOR REGISTRATION AND BILL OF SALE<br>(FORMS ACA-501 AND 502) ATTACHED   |                 |  |                 |
| OWNER'S NAME<br>Piper Aircraft Corporation   |          | PERMANENT ADDRESS (Street and No., City, Zone, State)<br>Lock Haven, Pennsylvania   |                 |  |                 |
| ATTACHMENTS (Check which)<br><input type="checkbox"/> ACA-319 <input type="checkbox"/> WEIGHT AND BALANCE REPORT<br><input type="checkbox"/> ACA-337 <input type="checkbox"/> SPECIAL APPROVALS<br><input type="checkbox"/> ACA-805 <input type="checkbox"/> DATA, DRAWINGS, ETC.<br><input type="checkbox"/> ACA-317 <input type="checkbox"/> UNAPPROVED DEVIATION DATA |          | I CERTIFY THAT THE ABOVE STATEMENTS ARE TRUE<br><br>June 27, 1947<br>DATE<br>Virginia Hungiville<br>OWNER OR AUTHORIZED AGENT<br>Virginia Hungiville Sec'y.<br>to the Sales Manager |                 |  |                 |
| FORM ACA-305b (FORMERLY ACA-307) AIRCRAFT INSPECTION REPORT<br>(To be completed by a CAA inspector or a designated inspector or representative)  |          |   |                 |  |                 |
| IT HAS BEEN DETERMINED THAT THE AIRCRAFT DESCRIBED IN 305 ABOVE IS IN CONFORMITY WITH THE FOLLOWING  |          |   |                 |  |                 |
| LISTING IN INSPECTOR'S HANDBOOK,<br>CHAP. XVIII  |          | AIRCRAFT SPECIFICATION  |                 | AIRWORTHINESS DIRECTIVE  |                 |
| PAGE NO.   | T.C. NO. | SERIAL NO.<br>A-691   | EFFECTIVE NOTES | NO.<br>A-0691  | EFFECTIVE NOTES |
| OTHER (Describe)<br>None   |          | EXCEPTIONS, IF ANY (if additional space is required, use<br>reverse)<br>None  |                 |  |                 |
| <input type="checkbox"/> FORM ACA-319<br>(Return to<br>owner)  |          | APPROVED BY _____   |                 | MECH. CERTIF. AND RATING NO. _____   |                 |
| <input checked="" type="checkbox"/> FORM ACA-1362<br>ISSUED  |          | CERTIFICATE VALID TO (Specify date) _____   |                 |  |                 |
| <input type="checkbox"/> AIRCRAFT AIRWORTHINESS CERTIFICATE WITH OPERATION LIMITATIONS FORM (ATTACHED) WAS ISSUED  |          |   |                 |  |                 |
| FINDINGS   |          |   |                 |  |                 |
| <input checked="" type="checkbox"/> AIRWORTHY<br><input type="checkbox"/> UNAIRWORTHY  |          | DESIGNEE'S SIGNATURE AND NO.<br>[Signature] 1006  |                 | DATE<br>June 27, 1947  |                 |
|  |          | CAA INSPECTOR'S SIGNATURE<br>[Signature]  |                 | <input checked="" type="checkbox"/> ACCEPTED<br><input type="checkbox"/> REINSPECTED                       |                 |
| REASON FOR DISAPPROVAL, OR REMARKS (Indicate if you have used the reverse to continue this or other item <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No)  |          |   |                 |  |                 |
| * Form 132 mailed directly to Chief Certification and<br>Recordation Section, Washington, D. C.<br>Form 309 issued.<br>Wt. & Balance Report in Aircraft.   |          |   |                 |  |                 |

