

Verified by Operator #24

Form approved
Budget Bureau No. 04-R060.

FEDERAL AVIATION AGENCY

MAJOR REPAIR AND ALTERATION FORM (AIRFRAME, POWERPLANT, PROPELLER OR APPLIANCE)

1. AIRCRAFT	MAKE Republic	MODEL RC 3	SERIAL NO. 258	NATIONALITY AND REGISTRATION MARK N6072K
2. OWNER	NAME (First, middle, last) C.A.V.U. INC.		ADDRESS (Street and number, city, zone and State) 2835 30 th. Ave. West Seattle 99, Wash.	
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)
a. AIRFRAME	As described in item 1 above			MAJOR REPAIR <input type="checkbox"/> MAJOR ALTERATION <input checked="" type="checkbox"/>
b. POWERPLANT				
c. PROPELLER				
d. APPLIANCE	TYPE AND MANUFACTURER			
	0.343	0.343	0.3	
4. AIRCRAFT WEIGHT AND BALANCE DATA <small>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.</small>				
CATEGORY	EMPTY WEIGHT (Pounds)*	EMPTY CENTER OF GRAVITY (Inches from datum)*	USEFUL LOAD (Pounds)*	
Standard	2227.5	121.3	N 922.5 U 582.5	
5. CONFORMITY STATEMENT (Complete and check)				
a. AGENCY'S NAME AND ADDRESS		b. KIND OF AGENCY		c. CERTIFICATE NO.
R.H. Van Der Molen 11620 S.E. 47th. Pl. Bellevue, Wash.		<input checked="" type="checkbox"/> U. S. Certificated Mechanic. <input type="checkbox"/> Foreign Certificated Mechanic. <input type="checkbox"/> Certificated Repair Station. <input type="checkbox"/> Manufacturer. <input type="checkbox"/> (Check if repair or alteration was made under delegation option procedures.)		A & E 570298
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.				
9-18-63 <small>(Date repair and/or alteration completed)</small>		<i>R.H. Van Der Molen</i> <small>(Signature of authorized individual)</small>		
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 of the Federal Aviation Agency and is				
<input checked="" type="checkbox"/> APPROVED } BY { <input type="checkbox"/> FAA Designee <input type="checkbox"/> Manufacturer <input type="checkbox"/> Canadian Department of Transport Inspector of Aircraft <input type="checkbox"/> REJECTED } <input type="checkbox"/> FAA Flight Standards Inspector <input type="checkbox"/> Repair Station <input checked="" type="checkbox"/> Other (Specify) <i>Auth Insp</i>				
9-18-63 <small>(Date of approval or rejection)</small>		<i>John J. Edwards</i> #E535755 <small>(Signature of authorized individual: title or identification number)</small>		
7. TO BE COMPLETED ONLY BY FAA PERSONNEL				
a. <input type="checkbox"/> Forwarded for engineering comment <input type="checkbox"/> See attached memorandum				
b. <input checked="" type="checkbox"/> Accepted <u>11/4/63</u> (Date) <input type="checkbox"/> Reinspected _____ (Date) <input type="checkbox"/> Spot Checked _____ (Date)				
WE-GADO-15 <small>(FAA designation number)</small>		<i>T. Smith</i> <small>(Signature Flight Standards Inspector)</small>		

NOV 12 1963

FORM FAA-337 (4-57)



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 FAA 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*

Installed Grimes rotating beacon on top of vertical fin #16 electrical cable. Circuit protected with 15 amp. fuse behind instrument panel. Power drain 5 amps.

Weight change / 2lbs. at station 313.

A/O Previous	2225.5	121.1	289569.5
Rotating Beacon	/ 25.0	/ 313.0	/ 625.0
	2227.5	121.5	270195.5

Installation and workmanship accomplished in accordance with CAM 18

FAA Form 44-337 (4-82)

APPROVED FOR SERVICE TO SERVICE (See instructions for use)

APPROVAL AUTHORITY: [Signature]

DATE: 12-12-85

OKLAHOMA CITY, OKLA. AGENCY AIRCRAFT REGISTRATION BRANCH

NOV 12 9 43 AM '85

FAA-44-337 (4-82)

*If additional space is needed attach additional sheets to this form. Aircraft nationality and registration mark and date work completed. Check block if additional sheets are attached.

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