

DEPARTMENT OF TRANSPORTATION FEDERAL AVIATION ADMINISTRATION				Form Approved Budget Bureau No. 04-R060.1	
MAJOR REPAIR AND ALTERATION (Airframe, Powerplant, Propeller, or Appliance)				FOR FAA USE ONLY	
				OFFICE IDENTIFICATION ASO-1500-15	
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	REPUBLIC		MODEL	FC-3
	SERIAL NO.	443		NATIONALITY AND REGISTRATION MARK	N6240K
2. OWNER	NAME (As shown on registration certificate)			ADDRESS (As shown on registration certificate)	
	Harlan Associates			1813 Wiley Post Trail Daytona Beach, Fl. 32014	
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	<del>  </del>
POWERPLANT					
PROPELLER					
APPLIANCE	TYPE				
	MANUFACTURER				
6. CONFORMITY STATEMENT					
A. AGENCY'S NAME AND ADDRESS			B. KIND OF AGENCY		C. CERTIFICATE NO.
Harvey Barnett 1806 Chendelle Court Daytona Beach, Fl. 32014			<input checked="" type="checkbox"/> U.S. CERTIFICATED MECHANIC <input type="checkbox"/> FOREIGN CERTIFICATED MECHANIC <input type="checkbox"/> CERTIFICATED REPAIR STATION <input type="checkbox"/> MANUFACTURER		AP 1302210
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		
2/4/89			<i>Harvey Barnett</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 <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	
2/4/89		1302210 1A		<i>Harvey Barnett</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.

**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 new fuel cell. All work done in accordance with  
STC# SA3968NM.

- Removed--1, ELT
- 2, 4" Venturi
- 3, Rate of climb

Empty Weight	CG	MOM
2156	115.33	253264.7
- 2	100	- 200 - ELT
- 1	70	- 70 - Venturi
- 1	40	- 40 - Rate of climb
<hr/> 2192	<hr/> New CG	<hr/> 252954.68
	115.39	
	New Useful load	
	956	

ADDITIONAL SHEETS ARE ATTACHED