

FAA AIRCRAFT REGISTRY  
 CAMERA NO. IN DATE: 5-2-91

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 <u>AEA-GADO-17</u>	
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	<u>Ercope</u>		MODEL	<u>415-C</u>
	SERIAL NO.	<u>1963</u>		NATIONALITY AND REGISTRATION MARK	<u>N99340</u>
2. OWNER	NAME (As shown on registration certificate)			ADDRESS (As shown on registration certificate)	
	<u>Neigh Earl B. Jr.</u>			<u>157 Graham Rd. Ithaca, New York 148850</u>	
3. FOR FAA USE ONLY					
The data identified herein complied with applicable airworthiness requirements and is approved only for the above described aircraft subject to conformity inspection by a person authorized in FAR 43.7 Approving Inspector <u>Matthew E. Williams</u> Date <u>12-8-82</u>					
4. UNIT IDENTIFICATION				5. TYPE	
UNIT	MAKE	MODEL	SERIAL NO.	REPAIR	ALTERATION
AIRFRAME	***** (As described in item 1 above) *****				XX
POWERPLANT					
PROPELLER					
APPLIANCE	TYPE				
	MANUFACTURER				
6. CONFORMITY STATEMENT					
A. AGENCY'S NAME AND ADDRESS			B. KIND OF AGENCY		C. CERTIFICATE NO.
<u>Stephen J. Selover R.D.#3 Trumansburg, New York 14886</u>			<input checked="" type="checkbox"/> U.S. CERTIFICATED MECHANIC		<u>A&amp;P 1838484</u>
			<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		
			<u>Stephen J. Selover</u>		
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		
<u>12-08-82</u>		<u>1838484 I.A.</u>	<u>Stephen J. Selover</u>		

