

Supplemental Type Certificate

Number SAL35SW

This certificate, issued to C. R. Ursell
109 Briarcliff Drive
San Antonio, Texas

certifies that the change in the type design for the following product with the limitations and conditions therefor as specified hereon meets the airworthiness requirements of Part 10 of the Federal Aviation Regulations.

Original Product — Type Certificate Number: 807
Make: de Havilland
Model: D.H. 104 Dove Series 1A, 2A, 5A, and 6A

Description of Type Design Change: Installation of fuselage nose mounted radome and structure in accordance with Drawing List U135L, Revision A, dated 9/20/62.

Limitations and Conditions:

This approval is for structure only; but when radar is installed, a placard will be required in full view of the pilot to shut off the radar in event of single engine operation due to electrical load demand of the system.

This certificate and the supporting data which is the basis for approval shall remain in effect until surrendered, suspended, revoked, or a termination date is otherwise established by the Administrator of the Federal Aviation Agency.

Date of application: September 28, 1962 Date reissued: November 15, 1967 Revision 2

Date of issuance: November 7, 1962 Date amended: _____



By direction of the Administrator

Glen W. Welsh
(Signature)

Glen W. Welsh
Chief, Engineering and Manufacturing Branch
(Title)

Any alteration of this certificate is punishable by a fine of not exceeding \$1,000, or imprisonment not exceeding 3 years, or both.

This certificate may be transferred in accordance with FAR 21.47.

INSTRUCTIONS: The transfer endorsement below may be used to notify the appropriate FAA Regional Office of the transfer of this Supplemental Type Certificate.

The FAA will reissue the certificate in the name of the transferee and forward it to him.

TRANSFER ENDORSEMENT

Transfer the ownership of Supplemental Type Certificate Number _____

to *(Name of transferee)* _____

(Address of transferee) _____

(Number and street)

(City, State, and ZIP code)

from *(Name of grantor)* *(Print or type)* _____

(Address of grantor) _____

(Number and street)

(City, State, and ZIP code)

Extent of Authority (if licensing agreement): _____

Date of Transfer: _____

Signature of grantor *(In ink)*: _____