

United States Of America
Department of Transportation - Federal Aviation Administration
Supplemental Type Certificate

Number SA3667SW

This Certificate issued to AAR Airframe and Accessories Group, Inc.
an Illinois Corporation
DBA: AAR Aircraft Services - Oklahoma
an Oklahoma Corporation
6611 South Meridian
Oklahoma City, OK 73159-1104

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 25 of the Federal Aviation Regulations.

Original Product Type Certificate Number: A52EU
Make: SAAB-FAIRCHILD
Model: SAAB SF 340A

Description of Type Design Change:

Installation of a freon air conditioner system in accordance with AAR Oklahoma Drawing List No. 860130 Rev. E dated 3/5/90 or later FAA approved drawing list.

Limitations and Conditions:

FAA Flight Manual Supplement dated 11/4/86 is required. Compatibility of this modification with previously installed equipment must be determined by installer.

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 Administration.

Date of application: January 27, 1986

Date reissued: 3/5/99; 12/13/00

Date of issuance: February 27, 1987

Date amended: May 10, 1990 Rev. 1



By direction of the Administrator

Michele M. Owsley
(Signature)

Michele M. Owsley, Manager
Airplane Certification Office,
Southwest Region

(Title)

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)*: _____