

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

*Number* SA8198SW

*This Certificate issued to* Limco-Airepair, Inc.  
d/b/a Airepair International  
5304 South Lawton Avenue  
Tulsa, OK 74107

*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:* A20WE  
*Make:* Boeing  
*Model:* 747-100, 747-200, 747-300, 747-400

*Description of Type Design Change:*  
Recore of Airesearch P/N 157790 Heat Exchanger in accordance with Airepair drawing 88P0341, Rev. A, dated 3/6/91, or later FAA approved revision.

*Limitations and Conditions:*  
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:* March 06, 1991

*Date reissued:* 8/15/97

*Date of issuance:* January 24, 1992

*Date amended:*



*By direction of the Administrator*

*Gary Bloach*  
(Signature)  
for J. J. Merrill  
Manager, Special 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.

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### 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)*: \_\_\_\_\_