

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

Number SA5764SW

This Certificate issued to Raytheon Aircraft Company,
an Arkansas Corporation
2400 David Grundfest Drive
Little Rock, AR 72206

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 : A21EA
Make : Canadair
Model : CL-600-1A11; CL-600-2A12

Description of Type Design Change:

Installation of Motorola NA-1295A Selcal System in accordance with Arkansas Modification Center Drawing List 600-047, Revision C, dated 04/30/99 or later FAA approved revision. FAA approved Airplane Flight Manual Supplement Rev. A, dated June 29, 1999 or later FAA approved revision is required.

Limitations and Conditions:

Compatibility of this design change with previously approved modifications must be determined by the installer. If the holder agrees to permit another person to use this certificate to alter the product, the holder shall give the other person written evidence of that permission.

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 : September 20, 1983

Date reissued : 7/6/99; 10/29/99

Date of issuance : August 03, 1984

Date amended : July 06, 1999



By direction of the Administrator

S. Frances Cox
(Signature)

S. Frances Cox, 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.

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)*: _____