

Supplemental Type Certificate

Number SH7727SW

This certificate issued to Bell Helicopter Textron
P. O. Box 482
Fort Worth, Tx 76101

certifies that the change in the type design for the following product with the limitations and conditions therefor as specified herein meets the airworthiness requirements of Part 29 of the Federal Aviation Regulations.

Original Product — Type Certificate Number: H4SW
Make: Bell
Model: 412

Description of Type Design Change:

Limit passenger seating to an approved configuration of 9 or less in order to move Height-Velocity information to the performance section of Rotorcraft Flight Manual.

Limitations and Conditions:

BHT-412-FMS-31 dated 2/8/90 or later FAA approved revision is required. This STC is only valid for an approved interior passenger configuration of 9 or less when operated as category B helicopter. 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: February 8, 1990

Date received:

Date of issuance: February 8, 1990

Date amended:



By direction of the Administrator

Larry M. Kelly
(Signature)

Larry Kelly, Manager
Rotorcraft Certification Office

(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)*: _____