

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

Number SA7842SW 190-1271
RAM

This certificate, issued to MIDCOAST AVIATION, INC.
P.O. BOX 1149
LITTLE ROCK, AR 72203

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 23 of the Federal Aviation Regulations.

Original Product — Type Certificate Number: A56EU
Make: British Aerospace
Model: 3201

Description of Type Design Change:

Installation of a ZEE Systems Freon Airconditioning System in accordance with Midcoast Aviation, Inc. Drawing List 48L003, Rev. C, dated August 9, 1990, or later FAA approved revision.

Limitations and Conditions:

FAA approved Airplane Flight Manual Supplement dated July 3, 1990, or later FAA approved revision 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: December 12, 1989

Date reissued:

Date of issuance: July 3, 1990

Date amended:



By direction of the Administrator
Mark R. Schilling
Mark R. Schilling, ^(Signature) Manager
Special 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)*: _____