

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

Number SA8233SW-D

This certificate, issued to Dassault Falcon Jet
P.O. Box 967
Little Rock, Arkansas 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 25 of the Federal Aviation Regulations.

Original Product — Type Certificate Number: A50NM
Make: Dassault Aviation
Model: Falcon 2000

Description of Type Design Change:

Installation of the Basic Oxygen System in accordance with Drawing List Report Number F2M-01011-1, Revision NC, dated 11-20-95 or later FAA approved revision.

Limitations and Conditions:

Compatibility of this modification with other previously approved modifications must be determined by the 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: April 5, 1995

Date reissued:

Date of issuance: April 13, 1995

Date amended: 10-16-95; 11-21-95 (REV. 2)



By direction of the Administrator

Andrew A. Boersma
(Signature)
Andrew A. Boersma
DAS8SW COORDINATOR

(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)*: _____