

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

*Number* SA7055SW-D

*This certificate, issued to* Falcon Jet Corporation.  
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:* A46EU  
*Make:* Avions Marcel Dassault-Breguet Aviation  
*Model:* Mystere - Falcon 50

*Description of Type Design Change:*

Installation of the Microwave Oven System in accordance with Drawing List Report Number F50-01124, Revision A dated 12-9-86, 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:* November 14, 1986

*Date reissued:*

*Date of issuance:* December 15, 1986

*Date amended:*



*By direction of the Administrator*  
*Joseph A. Sevart*  
Joseph A. Sevart (Signature)

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.*

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