

# Supplemental Type Certificate

*Number* SA733SW

Project A1053SWS

*This certificate, issued to* **Roane Flying Service Inc.  
West Helena, Arkansas**

*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 4a of the Federal Aviation Regulations.*

*Original Product — Type Certificate Number:* 743  
*Make:* Boeing  
*Model:* 75

*Description of Type Design Change:* Installation of Roane Flying Service Engine Mount according to Drawing No. RFS-2500-1-PW and Oil Cooler Mount according to Drawing No. 36-002 for Pratt & Whitney R-985 and R-1340 engines.

*Limitations and Conditions:*

**Modification limited to aircraft in restricted category.**

*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 Agency.*

*Date of application:* **November 8, 1966**

*Date reissued:*

*Date of issuance:* **December 21, 1966**

*Date amended:*



*By direction of the Administrator*  
*Glen W. Welsh*  
(Signature)

**Glen W. Welsh**  
**Chief, Engineering and Manufacturing Branch**

(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.

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