

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

Number SA3564SW 190-
WAS

This certificate, issued to Frank B. Johnston
Box 701067
San Antonio, Texas 78270-1067

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: A16EA
Make: Gulfstream Aerospace
Model: AA-5 Series

Description of Type Design Change:

Modification of torque tube assembly in accordance with Drawing GTTA, pages 1, 2 and 3, dated 11/17/85, revised 2/25/87, and Procedures of Modification Part Number 702065-502 dated 11/17/85; or in accordance with Drawing Numbers FBJ-1 dated October 20, 1989 and FBJ-2 dated October 20, 1989, or later FAA approved revision.

Limitations and Conditions:

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: November 17, 1985

Date received: 06/03/86

Date of issuance: January 13, 1986

Date amended: 05/26/87; 12/15/89 Rev. 2



By direction of the Administrator

Ron Dalton

Ron Dalton, Acting Manager
Special Programs 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)*: _____