

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

Number SA4704SW

Project A5029SW-S
JLP-190

This certificate, issued to Parks Industries Ltd., Inc.
8609 Valleyview
Amarillo, TX 79110

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 03 of the Civil Air Regulations.

Original Product — Type Certificate Number: 5A3
Make: Beech
Model: A45 (T-34A), D45 (T34B)

Description of Type Design Change: Installation of 15 gallon tip tanks according to STC SA808S0, Kit No. KB-1401, Revision "F", 4/12/79 and Parks Industries, Ltd. Drawings No. PI-921504 (3 sheets) dated 3/31/82 and PI-921501, dated 3/31/82.

Limitations and Conditions:

Modification must be accomplished at the Parks Industries, Ltd. facility.

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: September 15, 1980

Date reissued:

Date of issuance: June 23, 1982

Date amended:



By direction of the Administrator

Don P. Watson

(Signature)

for Don P. Watson
Chief, Aircraft Certification Division
Southwest Region

(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)*: _____