

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

*Number* SH8601SW

*This certificate, issued to* Heli-Dyne Systems, Inc.  
P.O. Box 966  
Hurst, TX 76053

*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 29 of the Federal Aviation Regulations.*

*Original Product — Type Certificate Number:* H9SW  
*Make:* Bell  
*Model:* 230

*Description of Type Design Change:*

Installation of a Honeywell EDZ-705 four tube flight instrument system in the Bell Model 230 helicopter in accordance with Heli-Dyne Systems, Inc., drawing list HD230-00-0002, dated December 22, 1992, Rev. I/R, or later FAA approved revision.

*Limitations and Conditions:*

FAA Approved Rotorcraft Flight Manual Supplement HDD-92-91 dated February 8, 1993, or later FAA approved revision is required. 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:* April 10, 1992

*Date issued:*

*Date of issuance:* February 8, 1993

*Date amended:*



*By direction of the Administrator*

*Larry M. Kelly*  
(Signature)

Larry M. Kelly, Manager  
Rotorcraft Certification 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 the 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 & street)

\_\_\_\_\_  
(City, State, and ZIP code)

Extent of Authority (if licensing agreement): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Date of Transfer: \_\_\_\_\_

Signature of grantor (In ink): \_\_\_\_\_