

Form approved.
Budget Bureau No. 41-E0224.

FEDERAL AVIATION AGENCY

MAJOR REPAIR AND ALTERATION FORM (AIRFRAME, POWERPLANT, PROPELLER OR APPLIANCE)

1. AIRCRAFT	MAKE Cessna	MODEL 170B	SERIAL NO. 20,417	NATIONALITY AND REGISTRATION MARK N2265D
2. OWNER	NAME (First, middle, last) William Gardiner Loye, Jr.		ADDRESS (Street and number, city, zone and State) Nelson Field, Benton, Kansas	
3. COMPLETE ONLY FOR UNIT REPAIRED AND/OR ALTERED. DESCRIBE WORK ACCOMPLISHED ON REVERSE IN ACCORDANCE WITH CIVIL AERONAUTICS MANUAL 15.				
UNIT	MAKE	MODEL	SERIAL NO.	NATURE OF WORK (Check)
a. AIRFRAME	***** (As described in item 1 above) *****			MAJOR REPAIR MAJOR ALTERATION X
b. POWERPLANT				

3. DESCRIPTION OF WORK ACCOMPLISHED.
Accomplished Tow Hitch Installation in accordance with Javelin Aircraft Company, Inc. Drawing No.813 dated May 15, 1964. Supplemental Type Certificate No.SA268CE.
(Back side of Form 337)

... by repair or alteration agency. However, in the case of a spare component, it will not be completed until such component is installed in an aircraft. At this time, it will be completed by the installing agency, if applicable.

CATEGORY	EMPTY WEIGHT (Pounds)*	EMPTY CENTER OF GRAVITY (Inches from datum)*	USEFUL LOAD (Pounds)*
Normal	Negligible Weight Change	-----	-----

3. CONFORMITY STATEMENT (Complete and check)

a. AGENCY'S NAME AND ADDRESS David D. Blanton Javelin Aircraft Co, Inc. 9175 E. Douglas Wichita, Kansas	b. KIND OF AGENCY <input checked="" type="checkbox"/> U. S. Certificated Mechanic. <input type="checkbox"/> Foreign Certificated Mechanic. <input type="checkbox"/> Certificated Repair Station. <input type="checkbox"/> Manufacturer. <input type="checkbox"/> (Check if repair or alteration was made under delegation option procedures.)	c. CERTIFICATE NO. A&E 510090
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4. I certify that the repair and/or alteration made to the unit(s) identified under item 3 above and described on the reverse or attachments hereto have been made in accordance with the requirements of Part 15 of the U. S. Civil Air Regulations and that the information furnished herein is true and correct to the best of my knowledge.

October 5, 1964 (Date repair and/or alteration completed)

David D. Blanton (Signature of authorized individual)

6. APPROVAL FOR RETURN TO SERVICE (Check and complete appropriate items)

Pursuant to the authority specified below the unit identified in item 3 was inspected in the manner prescribed by the Administrator of the Federal Aviation Agency and is

APPROVED } BY { FAA Designee Manufacturer Canadian Department of Transport Inspector of Aircraft
 REJECTED } FAA Flight Standards Inspector Repair Station Other (Specify)

October 5, 1964 (Date of approval or rejection)

James R. Smith, CE-EMDO 43 (Signature of authorized individual; title or identification number)

7. TO BE COMPLETED ONLY BY FAA PERSONNEL

a. Forwarded for engineering comment See attached memorandum

b. Accepted (Date) Reinspected (Date) Spot Checked (Date)