

## **MAJOR REPAIR AND ALTERATION**

(AIRFRAME, POWERPLANT, PROPELLER OR APPLIANCE)

- INOTELIATIONS								FOF	FOR GACA USE ONLY					
INSTRUCTIONS											Office Identification			
Fillit of type a		accordan	CE WIL	II GACAN Pail 43	, Ap	penc	IIX D							
	Make					Model								
1. AIRCRAFT	Serial No.					Nationality And Registration Mark								
0.004/150	Name (As shown on aircraft registration certificate)					Address (As shown on aircraft registration certificate)								
2. OWNER	Email													
3. FOR GACA USE ONLY														
	ATIC	ON				5. TYPE								
Unit	Make			Model			Serial Number			air	Alteration			
AIRFRAME	(As described	in item 1 above	lescribed in item 1 above)	(As described in item 1 above)										
POWERPLANT	,		,	,	,			,						
PROPELLER														
	Type:													
APPLIANCE Manufacturer:														
			6. CO	NFORMITY STA	ГЕМ	ENT								
A. Agency's Name and Address B. Kind of Age								С	. Certif	ficate	Number			
- J				☐ GACA Certificated Mechanic										
				☐ GACA Certificated Repair										
				Manufacturer										
				e unit(s) identified in Blo										
have been made	in accordance	with the requ	urement	's GACAR Part 43 and knowledge.	that t	he info	ormation	turnished	is corre	ect to i	the best of my			
Date	Name and Signature of Authorized Individual													
		7.40	DDOV	AL FOR RETURN	I TC	) CE	DVICE							
Pursuant to the auth	nority aiven to r							ted in the	manne	er pres	scribed by the			
Pursuant to the authority given to persons specified below, the unit identified in Block 4 was inspected in the manner prescribed by the President of GACA and is;   APPROVED   REJECTED by:														
				ction Authorization Holder			☐ Other: (Specify)							
☐ Manufacturer ☐ GACA Certifi				Repair Station										
Date Of Approval or Rejection Cer				cate or Designation No. Name and S				ignature of Authorized Individual						

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## **NOTICE**

Mass and Balance or Operating Limitations Changes Must Be Entered In The Appropriate Aircraft Record. An Alteration Must Be Compatible With All Previous Alterations To Assure Conformity With The Applicable Airworthiness Requirement

dentify with aircraft	o. DESCRIPTION (	OF WORK ACCOMP	Shed reference for approved d	ata usad s
dentily with aircraft	egistration mark, name of part repair date work completed. If more	ed/altered, work accomplishable as space is required, attach a	sned, reierence for approved d additional sheet)	ata used a
	acto work completed. If more	opaso io rogalioa, attaon c	industrial offoot)	

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